

*See Authors up to 12/1913*

# ANNUAL REPORT

ON THE

## HEALTH

OF THE

# CITY OF SHEFFIELD

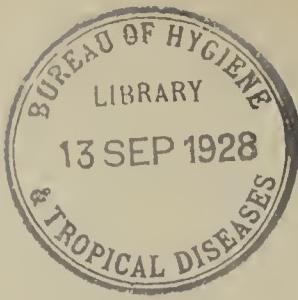
For the Year 1927.

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FRED. E. WYNNE, B.A., M.B., B.Ch., D.P.H.,

Medical Officer of Health.





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FRED. E. WYNNE, B.A., M.B., B.Ch., D.P.H.,

Medical Officer of Health.

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## City of Sheffield.

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### **HEALTH COMMITTEE**

as at December 31st, 1927.

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THE LORD MAYOR :  
ALDERMAN MOSES HUMBERSTONE.

CHAIRMAN :  
COUNCILLOR W. ASBURY.

DEPUTY CHAIRMAN :  
ALDERMAN W. BANCROFT.

ALDERMAN W. F. WARDLEY.

COUNCILLOR A. ASHMORE.

„ A. BARTON.

„ MRS. F. CHEETHAM.

„ J. COBLEY.

„ G. W. GASCOYNE.

„ J. W. HOLLAND.

„ H. W. JACKSON.

„ L. N. LEDINGHAM.

COUNCILLOR MRS. A. E. LONGDEN.

„ J. A. LONGDEN.

„ W. G. ROBINSON.

J. SIVIL.

„ J. SWEENEY.

„ F. UNWIN.

„ A. WARD.

„ S. WARREN.

„ S. WILLIS.

COUNCILLOR W. E. YORKE.

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### **SUB-COMMITTEES.**

AUDIT SUB-COMMITTEE.

HOSPITALS SUB-COMMITTEE.

MATERNITY AND CHILD WELFARE  
SUB-COMMITTEE.

SANITARY SUB-COMMITTEE.

# PUBLIC HEALTH STAFF

as at December 31st, 1927.

---

Medical Officer of Health, Administrative

Tuberculosis Medical Officer, and

Chief Sanitary Inspector ... ... FRED. E. WYNNE, B.A., M.B., B.Ch., D.P.H.

Deputy Medical Officer of Health and

Tuberculosis Medical Officer ... J. RENNIE, M.D., D.P.H.

Assistant Tuberculosis Medical Officers

N. KEATING, L.R.C.P., L.R.C.S.  
J. R. LIDDELL, M.R.C.S., L.R.C.P.  
J. H. CAMPBELL, M.R.C.S., L.R.C.P.  
E. BARNES, M.R.C.S., L.R.C.P.  
A. MEIKLEJOHN, M.B., Ch.B.  
T. S. TOWNSEND, M.A., B.M., B.Ch.

Surgical Tuberculosis Medical Officer ... C. LEE PATTISON, M.B., M.R.C.S.

Assistant Medical Officers for Maternity

and Child Welfare (part time) ... H. LEADER, M.B., M.R.C.S., L.R.C.P.  
ELLA BREMNER, M.B., Ch.B., D.P.H.  
ALICE WHITE, M.B., Ch.B., M.R.C.S., L.R.C.P.  
C. D. HOLDsworth, M.D., M.R.C.S.  
AGNES STEWART MACINTYRE, M.B., Ch.B.  
A. W. SCOTT, M.D., M.R.C.S.  
J. BLYTH, M.D., C.M.  
ELSA F. PAIGE, M.B., Ch.B.  
ANNIE D. SYKES, M.B., Ch.B.

Venereal Disease Medical Officers

(part time) ... A. RUPERT HALLAM, M.D., Ch.B.  
T. B. MOUAT, M.D., Ch.B., F.R.C.S.  
E. F. SKINNER, M.A., M.B., B.Ch., F.R.C.P., M.R.C.S.,  
J. B. FERGUSON WILSON, M.S., M.B., F.R.C.S., L.R.C.P.  
J. CHISHOLM, M.B., Ch.B., F.R.C.S.  
H. LEADER, M.B., M.R.C.S., L.R.C.P.

Chief Veterinary Inspector ...

... J. S. LLOYD, F.R.C.V.S., D.V.S.M.

Assistant Veterinary Inspectors ...

... W. TWEED, M.R.C.V.S., D.V.S.M.  
A. WALKER, M.R.C.V.S., D.V.S.M.

City Analyst ... ... ...

... J. EVANS, F.I.C., F.C.S.

Superintendent Sanitary Inspectors

... W. H. HARRISON, M. FAULDER, A. GREEN, A. E.  
BIRKHEAD, F. J. LOFLEY, W. NICHOLSON (Smoke),  
J. B. HOWARD (Workshops), C. W. LUCAS (Conver-  
sion of Privies), L. C. ELLIS (Tuberculosis), F.  
UNWIN (Meat), F. JOHNSON (Food and Drugs).

Chief Woman Sanitary Inspector

... Mrs. G. FRANKS.

Principal Statistical and Financial Clerk W. WATSON.

Principal Correspondence and General Clerk W. SWALLOW.

Tuberculosis Clerk ... ... ... G. F. HALLATT.

Statistics and Accounts Clerk ... ... F. O. RIDEOUT.

Maternity and Child Welfare Clerk ... Miss M. WALKLAND.

### GENERAL STATISTICS.

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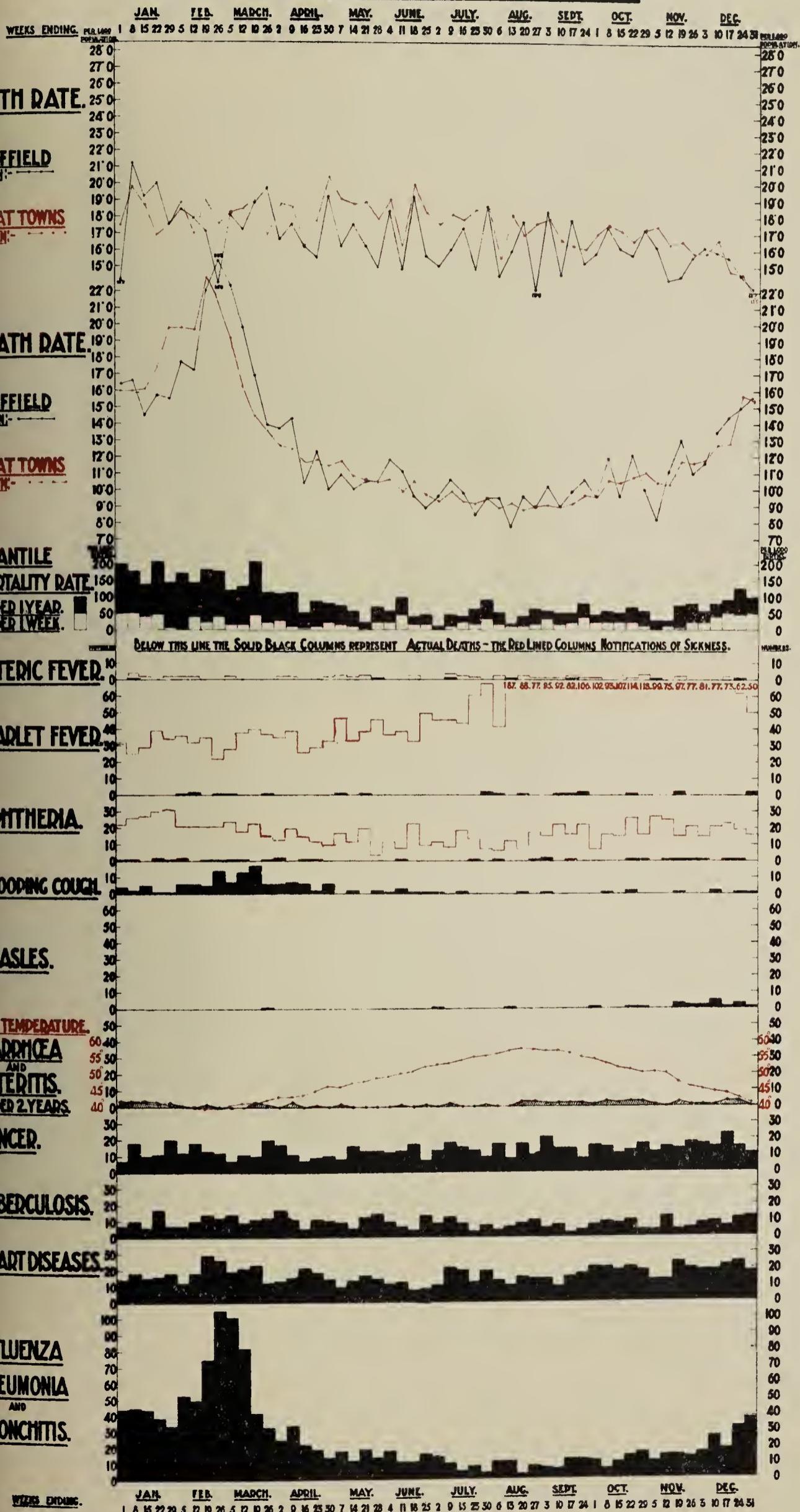
Area (as extended November 9, 1921) .. . . .	31,616 acres.
Population—1927 mean, as estimated by the Registrar General ..	524,900
Number of Structurally Separate Dwellings at Census 1921 (area as extended)	
In Occupation .. . . .	110,228
Not in Occupation .. . . .	2,170
	——— 112,398
Rateable Value (October, 1927) .. . . .	£2,580,881
Sum represented by a Penny Rate (October, 1927) .. . . .	£9,796

### EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

	Total	Males	Females	
Births (Legitimate) ..	8,181	..	4,217 3,964 ..	} Birth Rate, 16·2
,, (Illegitimate) ..	345	..	184 161 ..	
Deaths .. . .	6,436	..	3,482 2,954 ..	Death Rate, 12·3
Number of women dying in, or in consequence of childbirth—from sepsis ..	31			
				from other causes 31
Deaths of Infants under one year of age per 1,000 births :—				
Legitimate .. 88.		Illegitimate ..	157.	Total .. 91
Deaths from Measles (all ages) .. . . .	..	..	..	.. 23
,, Whooping Cough (all ages) .. . . .	..	..	..	.. 132
,, Diarrhœa (under 2 years of age) .. . . .	..	..	..	.. 69

# 1927. CITY OF SHEFFIELD. 1927.

## VITAL AND MORTAL STATISTICS.





TOWN HALL, SHEFFIELD,  
AUGUST, 1928.

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH COMMITTEE.

MR. CHAIRMAN, MESDAMES AND GENTLEMEN,

I have the honour to present herewith my Report on the Health of the City during 1927.

As will be seen from the figures given in the body of the Report, the result of the year's work has been satisfactory, in spite of an increase in the General Death-rate which was shared with the rest of the country, the figure 12·3 being the same as that for England and Wales, and comparing favourably with the average figure for the previous 10 years which was 13·3.

There was also an increase in the Infantile Mortality rate, which rose from 79 to 91.

These increases in mortality are very largely attributable to atmospheric conditions which were marked almost throughout the year by excessive humidity and an abnormally small amount of sunshine. The latter condition is naturally more felt in industrial than in rural districts and undoubtedly has a depressing effect on the vitality, especially of infants and young children.

Thus, if Table K (page 24) dealing with the principal causes of Infantile Mortality be examined it will be seen that the increase was mainly due to deaths from whooping cough, 56 as against 9 in the previous year, from bronchitis, 59 as against 42, and from pneumonia 136 as against 108, and influenza 17 as against 5. All these are respiratory conditions which are adversely affected by bad weather and darkness. On the other hand deaths from diarrhoea, which is generally more prevalent in hot dry weather, fell from 109 to 61.

That similar conditions manifested their effect on the General Death-rate can be seen from Table VIII, which shows that the death-rate from pneumonia, as compared with 1926, increased from 1·04 to 1·26 per 1,000; that from influenza from 0·24 to 0·47, and that from other respiratory diseases from 0·81 to 0·87.

The Chart which forms the frontispiece to this Report shows that this increase was almost entirely incurred during the first quarter of the year.

In spite of these adverse conditions the decline in mortality from Tuberculosis continues to be satisfactory. (See Table H.)

On the other hand there was a serious increase in the mortality from Cancer which rose from 1·19 per 1,000 to 1·39, the actual deaths being 728 against 622.

The most important event of the year under review from the point of view of Public Health was the great increase in the prevalence of small pox which reached its peak in January, when 316 cases were notified. This disease, in a mild form, has been very prevalent in the country generally during the last six years, and the number of cases in adjoining parts of Derbyshire, Nottinghamshire and Yorkshire has been a constant source of anxiety. A few sporadic cases had occurred in Sheffield in each year since 1921, but owing to the vigilance of medical men in the City and their co-operation with the Public Health Department, and the policy of isolation and vaccination of contacts, the disease did not gain any footing in the City until the last quarter of 1925, when 44 cases occurred. Special arrangements were then made for dealing with an outbreak on a large scale as described in my Report for 1925, these arrangements including the equipment of the Hutment Camp at Redmires for the nursing of Small Pox cases. A very considerable number of persons submitted to vaccination as a result of this outbreak, and during the earlier part of 1926 it seemed as though the danger had been got under control, but there is no doubt that a number of very mild cases escaped observation and the infection was still being spread among the un-vaccinated members of the community. The situation was complicated by the fact that Chicken Pox was also very rife among school children during this period, and many careless parents were content to attribute mild cases of Small Pox to this cause. There were also other cases of mistaken diagnosis which it was impossible to overtake until the infection had had a chance of spreading itself widely.

During the year the notifications received were as follows :—

January	...	...	316	April	...	...	29	July	...	...	11	October	...	9
February	...	...	155	May	...	...	30	August	...	...	12	November	...	11
March	...	...	64	June	...	...	20	September	...	...	3	December	...	7

During January the accommodation at Dart Square for contacts soon proved inadequate and two additional cottages at Edmund Road were taken over from the Board of Guardians and rapidly equipped. A large number of contacts were thus satisfactorily and comfortably housed, but this additional accommodation was soon over-taxed and it became necessary to isolate a very large number of contacts in their homes. This was a period of grave anxiety as the possibility of spread was obviously increased.

The total number of cases isolated at Dart Square was	...	...	...	...	887
,,	,,	Edmund Road was	...	...	263
,,	,,	at home was	...	...	1,252

Owing to the pressure on the available isolation beds for contacts, and the heavy cost of compensation for loss of work by employed contacts it became necessary to lessen the time occupied by disinfection without reducing its efficiency. A special staff of charwomen, protected by vaccination, was accordingly engaged, and the following is a copy of the instructions issued to the inspecting staff.

*"Disinfection after Small Pox."*

Owing to the impossibility of removing all contacts to Dart Square or Edmund Road, and in order to shorten the time during which contacts have to continue in isolation in their own homes, a modified system of disinfection has been introduced.

The Medical Officer of Health is satisfied that this method not only reduces the inconvenience caused to contacts and lessens the cost of compensation, but that it provides more thorough disinfection.

It is therefore to be clearly understood by all concerned that this method will in future be carried out in all cases.

In cases where the contacts are isolated at home no difficulty arises.

In cases where contacts are removed to Dart Square or Edmund Road, the procedure is somewhat more complicated.

In these cases—

1. The contacts are removed to one of the Isolation Cottages and there re-vaccinated the Superintendent Inspector retaining the key.

2. During the absence of the contacts, the Inspector and his assistants carry out the necessary fumigation, arrange for removal and return of goods suitable for steam disinfection which will be specified by the Superintendent Inspector. Other suitable goods are put to soak in disinfectant, or exposed to fumigation as directed by the Superintendent Inspector.

NOTE.—Complaints have been received of white goods (sheets, blankets, curtains, etc.,) having been spoiled by being put to soak in the same vessel as coloured goods. *This must be most carefully avoided in future.*

3. On the morning following completion of this work, the Superintendent Inspector will return the key to Dart Square, when the Medical Superintendent will discharge the contacts as soon as possible. The person returning the key should ascertain as nearly as possible the time at which contacts will be discharged, and forthwith notify the Chief Woman Inspector who will arrange for her assistant Inspector and necessary charwomen to attend and complete the cleansing of the house.

Contacts will be instructed before leaving the Isolation Cottages that they *must remain in isolation* at home until such cleansing is completed.



**CITY OF SHEFFIELD**  
**SMALL POX**  
**1927**  
**SPOT MAP SHOWING.**  
**DISTRIBUTION OF CASES**



It will be the duty of the Women Inspectors to see that this instruction is complied with as far as possible, and when necessary to see that arrangements are made for the provision of necessary food.

(Signed) F. E. WYNNE,

*Medical Officer of Health."*

All this work entailed a great strain on the staff. Superintendent Inspector Birkhead and his assistants were working literally night and day for several weeks and had to be assisted by Inspectors from other districts from whom a rota for duty was formed. Mrs. Franks and the staff of women Inspectors rendered invaluable assistance in supervising the cleansing of premises, maintaining discipline and loyal co-operation among the isolated families, purchasing provisions for such families, detecting undiagnosed cases, and assisting in tracing the origin of new cases. A corresponding strain was thrown upon Mr. Swallow and the clerical staff under his control. All this work largely contributed to restricting the outbreak almost entirely to the Attercliffe and Darnall districts, and in shortening its duration.

There was a slight invasion of the Manor Estate, as will be seen from the spot map which is reproduced opposite. These cases were traced to families who had left the Attercliffe and Darnall districts and returned there to take part in Christmas festivities.

During the whole period of the outbreak chicken-pox was also prevalent and this resulted in our receiving very heavy demands to visit and confirm the diagnosis in doubtful cases. This was done by Dr. Rennie, Deputy Medical Officer of Health and myself. But early in January it became impossible for us to cope with this work in addition to other duties. Accordingly Dr. G. H. Coke was appointed as temporary assistant for this duty, on the recommendation of the Ministry of Health. Dr. Coke remained with us until the epidemic began to abate in February, and I am glad to take this opportunity of thanking him for the admirable services rendered and the accuracy of his diagnosis.

The accompanying map shows the concentration of the cases in Attercliffe and Darnall with a tendency to spread along the tram-route. It also shows the minor invasion of the Manor Estate referred to above. The block of cases near the centre of the town represents the isolation cottages at Dart Square where naturally a number of cases arose among persons unvaccinated prior to exposure to infection. During January and February the public became thoroughly alarmed and very large numbers of persons sought vaccination. Public vaccinators and private practitioners were often at work until midnight and later, dealing with the queues of people who sought protection. Many of the large employers of labour granted facilities for the vaccination of their staffs and employees, and I have to thank the editors of the *Sheffield Telegraph* and the *Yorkshire Telegraph and Star* for their valuable support in promoting this essential measure.

It is impossible to obtain accurate figures as to vaccination, but it is certain that since 1925 at least 100,000 persons have been vaccinated, mainly of course in the infected areas. During this period we have had nearly 1,000 cases of small-pox, and not one has occurred in a person vaccinated within 11 years of exposure to infection. No one who has had, as I have, the opportunity of watching the invasion of hundreds of families by this disease, and observing the mathematical precision with which the unvaccinated succumb to infection while the recently vaccinated escape, could possibly question the efficacy of vaccination as a preventive measure, whatever other objections to this procedure they might maintain.

The suggestion made by Professors McIntosh and Turnbull, and certain Continental observers that vaccination might be the cause of a form of encephalitis was naturally a cause of great concern to those responsible for the administration of a serious outbreak. It will be remembered that Sheffield was one of the areas most seriously affected during the pandemic of Epidemic Encephalitis, (mis-called "Sleepy Sickness") in 1924, when we had over 300 ascertained cases, and an unknown number of abortive or undiagnosed cases of this most disastrous disease. Since that time we have had sporadic cases almost every month, so that the disease may be said to be endemic in the City. Any factor therefore that might have lit up a further epidemic of encephalitis would

have been a calamity, and had there been any local evidence of a connection between the two things, I should have used every endeavour to prevent a single citizen from being vaccinated, as however expensive, an extension of small-pox in the mild form in which it occurs at present would have been preferable to even a few cases of encephalitis. I accordingly kept a careful watch on the comparative incidence of small pox and encephalitis, and the results are presented in the two following charts. It may be assumed that the incidence of vaccinia is closely proportional to that of small-pox.

Chart I shows graphically the incidence of small-pox in each year from 1922 to 1927. It will be seen that in 1924, the year when encephalitis was epidemic and severe, there were only a few imported cases of smallpox. In 1925 there were 44 cases of small-pox and vaccination on a considerable scale began.

Chart II compares the incidence of small-pox and encephalitis in each month from October 1925 to May 1927. It shows a slight increase of encephalitis during January and February of 1925, when small- pox was almost at its minimum. These cases occurred three and four months after vaccination of a considerable number of people in October 1925, and the average incubation period of the type of encephalitis alleged to be due to vaccination is stated to be 11 days. During and following the sudden and very heavy incidence of small-pox in January and February, and the tremendous "outbreak" of vaccination at this period, the incidence of encephalitis showed less than the "normal" fluctuation of the preceding months, the maximum number of cases being four in February. However interesting from the point of view of the experimental pathologist this alleged relationship may be, the practical epidemiologist may say of it as Bishop Butler said of the "Doctrine of Necessity"— "This doctrine, even if true, is as though it were not true."

In general sanitation the year has been one of satisfactory progress within the limits imposed upon us by financial exigencies. The abolition of the privy midden is completed in all the central portions of the town, and the scheme of the Committee for the abolition of these relics of mediæval ignorance is rapidly approaching completion. A very large number of yards and courts has been repaved, with all the attendant improvements in domestic and personal hygiene to which I have repeatedly called attention.

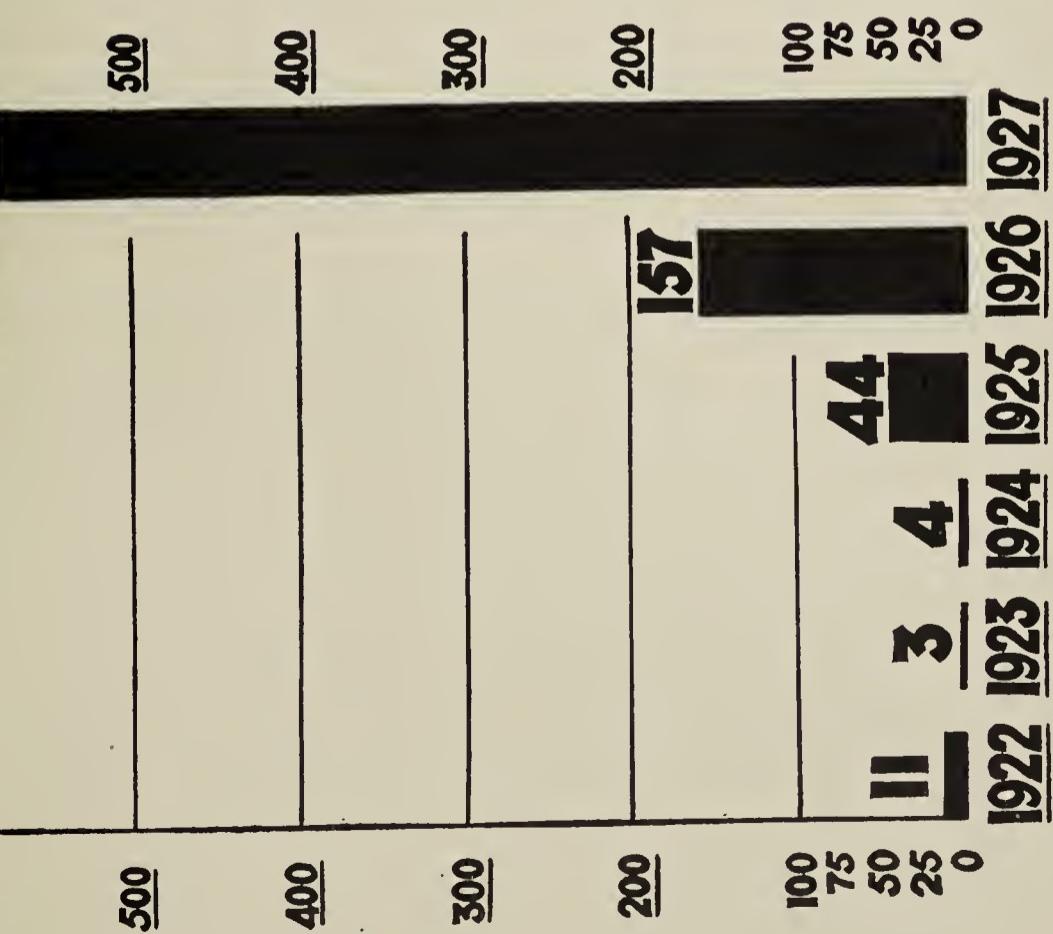
The number of houses erected shows a slight decrease as compared with 1926, although much above the average of the last few years. This is satisfactory, but the amount of over-crowding continues to be deplorable.

The By-Laws relating to "Houses let in Lodgings" have been largely enforced and have proved most helpful, but whatever its Statutory Powers, a Public Health Department can only nibble at abuses, as long as economic conditions remain what they are. The real enemies of the Public Health are Unemployment and Poverty. We now know the causes of most of our so called "preventable diseases," and if the people generally could become reasonably prosperous we have the statutory powers to prevent the exploitation of poverty which took place in the 19th century. Now that we have got the knowledge, and as I believe, the goodwill, we lack the funds. The Committee has been very active in the administration of their Powers with regard to the Milk Supply, and I am satisfied that a material improvement has already been achieved. But it is very limited. A considerable quantity of milk of a filthy description is still legally supplied to consumers in this City as elsewhere throughout the kingdom. Representatives of the Committee have themselves heard it seriously argued by a local milk producer that a plaster of cow dung on the flanks of his cows was necessary "to keep them warm." They have also heard it argued that the small farmer could not afford to pay for cleanliness owing to competition and "cutting of prices."

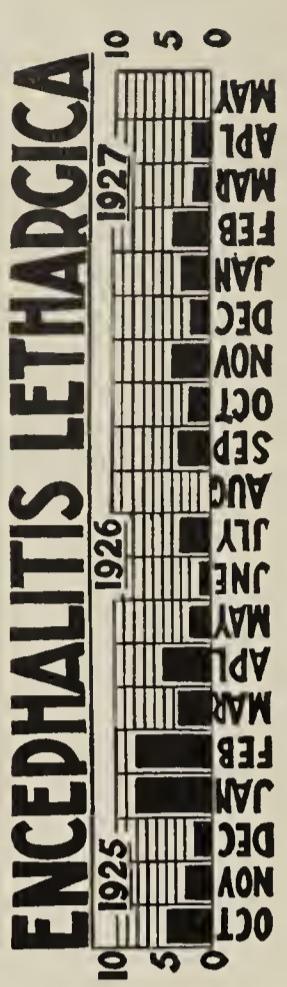
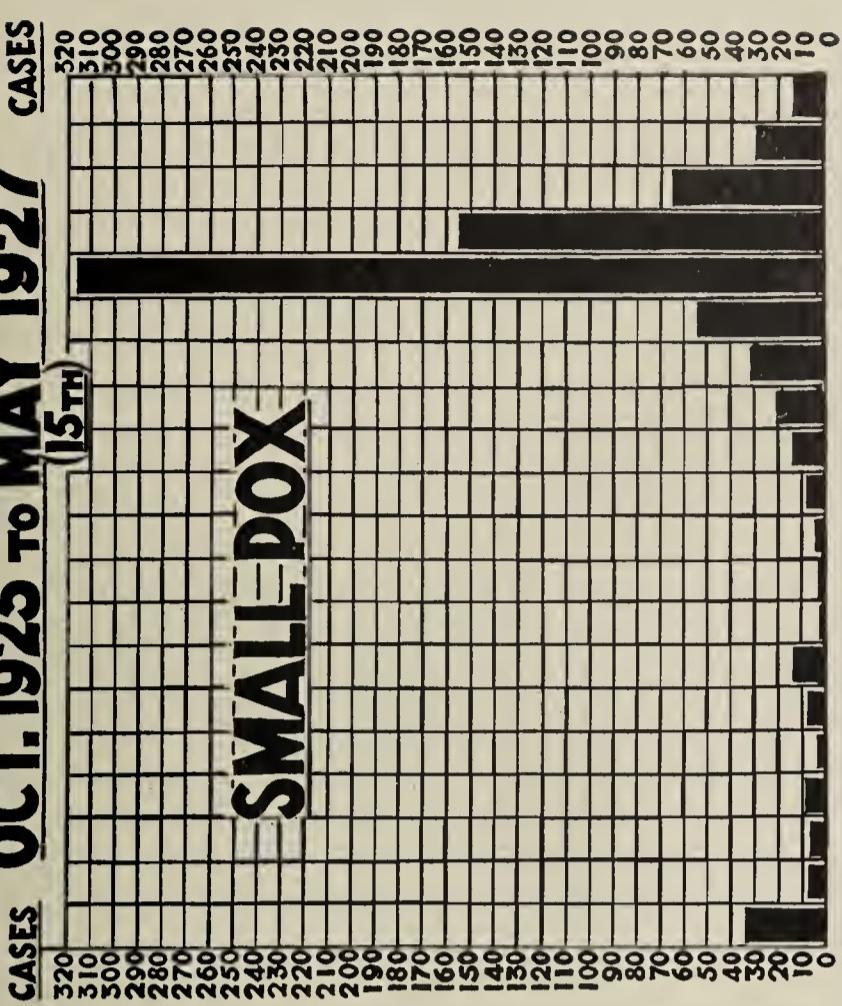
On the other hand they have seen perfectly clean and wholesome milk produced on an economic and profit-earning basis, in a few cases by Sheffield farmers with no special facilities, to whom the utmost credit is due. In view of recent knowledge it is surely time that profit-earning from the sale of dirty disease-producing milk should be made illegal, but this has not been achieved by existing legislation.

**SHEFFIELD**  
**SMALLPOX**  
**YEARLY INCIDENCE**  
**1922-1927.**

CASES  
TO 15<sup>TH</sup> MAY 1927  
600



**SHEFFIELD**  
**SMALLPOX &**  
**ENCEPHALITIS LETHARGICA**  
**MONTHLY INCIDENCE**  
**OCT. 1925 TO MAY 1927**





The year has seen some very important developments in connection with our Maternity and Child Welfare Work. This had altogether outgrown the accommodation in the old premises at Norfolk Street, and in October the new Centre was opened by Mr. Neville Chamberlain, Minister of Health. The new building provides ample accommodation for this most essential work, including the rapidly extending pre-natal work, for many years to come, and provision has been made for extensions in future.

The new Maternity Block at the Nether Edge Hospital was also opened in March of the year under review. After a little delay this Institution has now become known to and thoroughly appreciated by the class of people for whom it is intended, and has achieved most gratifying results.

After much preliminary work during the last few years an important step forward was taken by the formation of the Sheffield and Rotherham Joint Smoke Abatement Committee in April 1927. This was the first Statutory Joint Committee to be formed under the provisions of the Public Health (Smoke Abatement) Act of 1926. The Rotherham Corporation has co-operated with Sheffield in a most cordial spirit, and an influential Committee dealing with a very large industrial area has been formed to co-ordinate this most essential work. The staff of inspectors has been increased from three to five, one Inspector being detailed as a whole-time officer for the Rotherham County Borough area. Several important conferences have been held between the Joint Committee and Representatives of the Sheffield & District Engineers Employers' Federation, and already a new spirit of co-operation between these important bodies has been inaugurated. It is hoped that the area administered by the Joint Committee will shortly be extended so as to link up with Joint Committees in the West Riding and that in this way a common policy may be established over an enormous industrial area and an increased interest in the protection of the public from the noxious effects of industrial smoke will be developed among the great employers of labour, without whose cordial co-operation all legislation and all the efforts of Local Authorities are stultified. The Committee has followed with great interest the commercial development of smokeless fuel for domestic and other purposes which seems at present to offer the only practical solution of the domestic smoke problem.

I remain

Your obedient Servant,

FRED. E. WYNNE, B.A., M.B., B.Ch., D.P.H.,

*Medical Officer of Health.*

## VITAL AND MORTAL STATISTICS.

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**SPECIAL FEATURES.**—The General Death Rate was the highest since 1921. The very low mortality rates from Tuberculosis constituted a new record. After a fall in the mortality rate from Cancer in 1926, the figure rose in 1927 to the highest on record. The Infant Mortality rate was the highest since 1921.

**AREA.**—The area of the City as extended 9th November, 1921, is 31,616 acres.

**POPULATION.**—The Registrar General's estimate of the population of Sheffield at the middle of 1927 was 524,900 for death rate and 525,100 for birth rate. The first of these figures which represents the resident population, shows an increase over the previous year's estimate of 1,600 only, although the natural increase, i.e., the excess of births over deaths from June, 1926, to June, 1927, was 2,578.

With regard to the figures showing the distribution of population in Registration Sub-Districts and Sections, which appear in Table V., the estimates have been based upon the 1921, Census, with certain additions in respect of new houses erected in these areas since 1921.

**Sex and Age Distribution.**—The following Table, which is based upon 1921 Census reports, is reproduced in order to show the age and sex distribution of the population of the City and the change which took place during the 10 years between 1911 and 1921.

**TABLE A.—Censuses 1911 and 1921. Percentage of each sex in quinquennial age groups.**

Ages	1911		1921	
	Percentages		Percentages	
	Males	Females	Males	Females
0— 4	12·0	11·8	—10·0	— 9·3
5— 9	11·0	10·7	—10·1	— 9·8
10—14	10·0	9·9	+10·4	+10·3
15—19	9·2	9·4	+ 9·4	+ 9·7
20—24	8·2	8·6	— 8·0	+ 8·9
25—29	8·7	8·8	— 7·7	— 8·2
30—34	8·6	8·3	— 7·1	— 7·3
35—39	7·9	7·4	— 7·4	— 7·3
40—44	6·4	6·0	+ 7·2	+ 6·9
45—49	5·2	5·0	+ 6·7	+ 6·1
50—54	4·1	4·1	+ 5·3	+ 4·8
55—59	3·2	3·2	+ 4·0	+ 3·7
60—64	2·4	2·5	+ 2·8	+ 2·9
65—69	1·6	1·9	+ 2·0	+ 2·2
70—74	0·9	1·2	+ 1·1	+ 1·4
75—79	0·4	0·6	+ 0·6	+ 0·8
80—84	0·2	0·3	= 0·2	= 0·3
85—89	0·0	0·1	= 0·0	= 0·1
90—94	0·0	0·0	= 0·0	= 0·0
95 and over	0·0	0·0	= 0·0	= 0·0

The signs + —, and = show the comparison with 1911 figures—higher, lower, or equal.

**MARRIAGES.**—The marriage rate was 15·9, which was 1·9 higher than the rate for 1926. It was pointed out in the Annual Report for 1921 that for the first time on record the marriage rate was less in Sheffield than in England and Wales as a whole. The disparity was further accentuated in 1922, when the rate fell to 14·4 as compared with 15·7 for England and Wales. Sheffield's

rate for 1922, moreover, was the lowest recorded for the City, whilst that for England had been lower than in 1922 in 17 of the 33 years shown in the table. The rate for 1923 was the same for Sheffield as for England and Wales ; in 1924-1926 it was slightly below that for England and Wales ; and in 1927 it was 0·2 higher.

Table III. gives marriages and rates for Sheffield and for England since 1890.

**BIRTHS.**—The number of births registered during the year was 8,684 and the transferable births numbered 58 inwards and 216 outwards. The number of births allocated to Sheffield, therefore, was 8,526 which was less than in the preceding year by 487. The annual birth rate was 16·2 per 1,000 persons living, calculated upon a population of 525,100 (Registrar General's estimate for purposes of birth rate). The average rate for the previous ten years was 20·7. Owing to the doubt about the accuracy of population estimates for the war years, the actual number of births is given in the following table for the years 1917 onward, together with the birth rates :—

Year		Births		Rate per 1,000
1917	.....	11,026	.....	21·1
1918	.....	10,746	.....	20·6
1919	.....	10,353	.....	21·0
1920	.....	13,130	.....	26·6
1921	.....	11,907	.....	23·8
1922	.....	10,804	.....	20·7
1923	.....	10,195	.....	19·4
1924	.....	9,712	.....	18·5
1925	.....	9,321	.....	17·7
1926	.....	9,013	.....	17·2
Average	1917-26	.....	10,621	.....
	1927	.....	8,684	.....
				16·2

The birth-rate for 1927 is 4·5 lower than the average for the last decade, and is the lowest ever recorded in Sheffield.

**DEATHS.**—The number of deaths of Sheffield residents during the year among the civil population was 6,436 (3,482 male, 2,954 female), making a death rate of 12·26 per 1,000 living, which is the highest since 1921. The average death rate for the decade 1917-1926 was 13·3. For the reason stated above, the actual number of deaths are given in the following table.

Year		Deaths		Rate per 1,000
1917	.....	6,892	....	14·7
1918	.....	9,732	.....	20·9
1919	.....	6,564	.....	13·9
1920	.....	6,622	.....	13·4
1921	.....	6,284	.....	12·5
1922	.....	6,097	.....	11·7
1923	.....	6,012	.....	11·5
1924	.....	6,110	.....	11·6
1925	.....	6,078	.....	11·5
1926	.....	5,927	.....	11·3
Average	1917-26	.....	6,632	.....
	1927	.....	6,436	.....
				12·3

A comparison of the death rate of Sheffield with that of England and Wales in quinquennia is given in the following table. It will be noted that for the periods 1921-25 and 1926-27 Sheffield's rate was below that for England and Wales. The lower mortality in Sheffield from Diphtheria, Influenza and Cancer accounts for this to some extent.

Quinquennial Periods	Mean Annual Mortality Rate per 1,000 of the population					England
	Sheffield		England			
1871-1875	...	...	26·8	.....	22·0	
1876-1880	...	...	24·2	.....	20·8	
1881-1885	...	...	21·6	.....	19·4	
1886-1890	...	...	22·1	.....	18·9	
1891-1895	...	...	20·9	.....	18·7	
1896-1900	...	...	20·6	.....	17·7	
1901-1905	...	...	18·2	.....	16·1	
1906-1910	...	...	16·4	.....	14·7	
1911-1915	...	...	15·9	.....	14·3	
1916-1920	...	...	15·7	.....	14·4	
1921-1925	...	...	11·8	.....	12·2	
1926-1927 (2 yrs).	...	...	11·8	.....	12·0	

SMALL-POX.—There were 667 cases of Small-Pox notified during the year, one of which was fatal.

MEASLES.—The number of cases notified voluntarily during 1927 was 33, 8 of which were removed to the City Hospital, Lodge Moor.

The mortality rate for the year was 0·04, 0·09 below the rate for 1926. The average rate for the five years 1922-26 was 0·15 per annum.

SCARLET FEVER.—The death rate from Scarlet Fever was 0·04 per 1,000 of the population, which has to be compared with an average annual rate of 0·02 for the quinquennium 1922-1926; and the attack rate was 5·91 per 1,000, as against 2·65 for the quinquennium 1922-1926.

DIPHTHERIA.—The death rate from Diphtheria was 0·06 per 1,000 of the population. This has to be compared with an average of 0·06 during the quinquennium 1922-1926. The attack rate during 1927 was 1·65 as compared with 2·01 for 1926 and 1·35 for the quinquennium 1922-26.

WHOOPING COUGH.—The mortality from this disease was at the rate of 0·25 per 1,000 living. The average for the quinquennium 1922-1926 was 0·12.

TYPHOID FEVER.—The death rate from Typhoid Fever gradually declined from 0·09 in 1912 to 0·002 in 1919, and in 1920 not a single death was attributed to this disease. In 1921, however, there were six deaths, giving a rate of 0·012; in 1922, four deaths, giving a rate of 0·008; in 1923 eight, giving a rate of 0·015; in 1924 ten, giving a rate of 0·019; in 1925 eight, giving a rate of 0·015; in 1926 five, giving a rate of 0·010, and in 1927 eleven, giving a rate of 0·021 per 1,000 living.

The number of typhoid cases notified during the year 1927 was 42, giving an attack rate of 0·080 per 1,000 living, which has to be compared with an average for the quinquennium 1922-26 of 0·085.

At one time we looked forward with absolute certainty to the increase of Typhoid Fever in the Autumn, but since 1914 there has been no autumnal increase in the prevalence of Typhoid Fever.

DIARRHŒA AND ENTERITIS, UNDER TWO YEARS OF AGE.—The death rate among infants under two from Diarrhoea and Enteritis during 1927 was 0·13 per 1,000 persons living. The death rates in recent years have been as follows:—0·24 in 1926, 0·16 in 1925, 0·17 in 1924, 0·24 in 1923, 0·15 in 1922 (the lowest on record), 0·46 in 1921, 0·43 in 1920, 0·28 in 1919, 0·37 in 1918 and 0·44 in 1917.

The great improvement in the prevalence of Diarrhoea can only be attributed to the greater attention given to Child Welfare, the activities of the Women Inspectors, especially their educational work, and the large substitution of Dried Milk for fluid milk; the measures taken for the

prevention of fly breeding, and instructions to the public as to the danger of flies; the abolition of privy middens in the congested parts of the town, and the campaign against unpaved yards.

**CEREBRO-SPINAL FEVER.**—During the year there were nine notified cases of Cerebro-Spinal Fever, with four deaths.

**ACUTE POLIOMYELITIS.**—Seventeen cases of Acute Poliomyelitis were notified as against 6 in 1926, 16 in 1925, 53 in 1924, one in 1923, and 20 in 1922. Six deaths were registered in 1927.

**TABLE B.—*Diseases made notifiable during 1919.***

	CASES NOTIFIED								
	1919	1920	1921	1922	1923	1924	1925	1926	1927
Encephalitis Lethargica ...	7	17	14	8	9	337	54	41	24
Pneumonia—Acute Primary and Acute Influenza ...	830	1759	1275	2367	2832	3345	3219	2643	3154
Trench Fever ... ...	8	...	...	...	...	...	...	...	...
Dysentery ... ...	5	2	2	1	2	1	1	...	...
Malaria ... ...	78	21	13	7	4	1	2	2	4

All the notified cases of Trench Fever, Dysentery, and Malaria were contracted abroad, with the exception that in the case of two Malaria patients notified in 1923 there was an element of doubt; both, however, had served with H.M. Forces abroad.

**ENCEPHALITIS LETHARGICA.**—As mentioned in the 1924 report, that year was unfortunately noteworthy for a very severe outbreak of Encephalitis Lethargica. The first case was notified on January 14th, and the total number of notifications, in which the diagnosis was, as far as possible, confirmed, was 301. The number of deaths was 40, giving a fatality rate of 13 per cent. 54 cases were notified during 1925, and the deaths registered totalled 21, a fatality rate of 39 per cent. 41 cases were notified during 1926, and 18 deaths were registered, a fatality rate of 44 per cent. and during 1927, 24 cases were notified, and 19 deaths were registered, a fatality rate of 79 per cent.

**INFLUENZA.**—It will be remembered that the prevalence of Influenza was world-wide in 1918. All parts of the country have been visited by minor epidemics in each year since then. Below are set out the mortality rates per 1,000 living for the years 1918 onward in Sheffield and in the whole country.

	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927
Sheffield ... ...	4.55	1.10	0.86	0.47	0.23	0.51	0.35	0.23	0.24	0.48
England and Wales ...	3.13	1.22	0.28	0.24	0.56	0.22	0.49	0.33	0.23	0.57

**PNEUMONIA.**—It has been the practice since the beginning of 1922 until recently to draw the attention of the medical attendant to failure to notify whenever an unnotified case of Pneumonia has appeared in the death returns. This has resulted in practically every case of fatal Pneumonia being notified prior to death, and has made the incidence of Pneumonia in Sheffield apparently excessive as compared with other towns.

Every case notified and treated at home is visited by the Queen's nurses.

The percentage of cases removed to hospital during 1927 was 11.3.

The following table shows the number and the percentage of cases removed to the City Hospital in each year since 1919, when the disease was made compulsorily notifiable.—

**TABLE C.**—*Pneumonia, Cases notified, removed to City Hospital, and percentage removed.  
Years 1919 to 1927.*

	1919	1920	1921	1922	1923	1924	1925	1926	1927
Cases Notified ... ... ...	842	1759	1275	2367	2832	3347	3219	2643	3154
Cases removed to City Hospital ...	196	518	526	343	452	578	562	466	357
Percentage of Cases removed ...	23.3	29.4	41.3	14.5	16.0	17.3	17.5	17.6	11.3

Military cases are included in the above figures.

Particulars are given below with regard to mortality from Pneumonia in males and females during 1927 and the previous five years. These figures show that there is no real excess of pneumonia in the City although slightly higher than those for England.

**TABLE D.**—*Pneumonia Mortality.*

Year	Deaths			Rate per 1,000	Rate per 1,000 England and Wales
	Males	Females	Total		
1922	327	176	503	0.96	1.07
1923	317	217	534	1.02	0.87
1924	357	222	579	1.10	1.00
1925	347	236	583	1.11	0.95
1926	333	212	545	1.04	0.83
Average for 5 years	336	213	549	1.05	0.94
1927	410	255	665	1.27	0.95

**BRONCHITIS.**—The mortality in the sexes during 1927 and the quinquennium 1922-26 is set out in the table below. The figures compare favourably with those for England.

**TABLE E.**—*Bronchitis Mortality.*

Year	Deaths			Rate per 1,000	Rate per 1,000 England and Wales
	Males	Females	Total		
1922	279	228	507	0.97	1.07
1923	235	220	455	0.87	0.85
1924	241	239	480	0.91	0.97
1925	242	207	449	0.85	0.91
1926	201	157	358	0.68	0.77
Average for 5 years	240	210	450	0.86	0.91
1927	183	217	400	0.76	0.84

CANCER.—The mortality from Cancer in the sexes during 1927 and the previous five years is set out below :—

**TABLE F.—Cancer Mortality.**

Year	Deaths			Rate per 1,000
	Males	Females	Totals	
1922	286	329	615	1·18
1923	296	325	621	1·19
1924	339	314	653	1·24
1925	361	336	697	1·32
1926	316	306	622	1·19
Average for 5 years	320	322	642	1·22
1927	392	336	728	1·39

TUBERCULOUS DISEASES.—The death rate from Tuberculous Diseases declined steadily from 1901 to 1910, but during the next four years there was a setback in the decline ; and during the years of the War there was a decided tendency to increase. There was again a marked decline in 1919, and the improvement has been maintained.

The death rates from all Tuberculous Diseases during 1927 and the previous 20 years were as follows :—

1907	.....	1·70	1914	...	...	1·68	1921	...	...	1·24
1908	...	1·78	1915	...	...	1·78	1922	...	...	1·22
1909	...	1·57	1916	...	...	1·73	1923	...	...	1·03
1910	...	1·39	1917	...	...	1·82	1924	...	...	1·02
1911	...	1·59	1918	...	...	1·84	1925	...	...	0·99
1912	...	1·67	1919	...	...	1·28	1926	...	...	0·93
1913	...	1·64	1920	...	...	1·19	1927	...	...	0·89

The deaths from Tuberculosis of the Lung alone gave a rate of 0·70 per 1,000 living during 1927. The average for the quinquennium 1922-1926 was 0·85.

The following shows sex mortality during 1927 and the previous 10 years :—

**TABLE G.—Tuberculosis Mortality in Sexes.**

Year	Tuberculosis Deaths						Total Deaths	
	Respiratory		Other Forms		All Forms			
	Males	Females	Males	Females	Males	Females		
1917	417	248	111	90	528	338	866	
1918	409	254	115	87	524	341	865	
1919	286	186	71	56	357	242	599	
1920	293	169	54	74	347	243	590	
1921	307	193	64	55	371	248	619	
1922	349	188	50	49	399	237	636	
1923	265	183	50	41	315	224	539	
1924	286	145	60	46	346	191	537	
1925	261	156	57	47	318	203	521	
1926	243	147	49	46	292	193	485	
1927	253	116	39	60	292	176	468	

The notifications of Tuberculosis of Lung since 1911, the year of opening the Tuberculosis Dispensary were as follows :—

1911	...	...	...	836 cases.	1919	...	...	...	1001 cases.
1912	...	...	...	981 ,,	1920	...	...	...	1139 ,,
1913	...	...	...	1033 ,,	1921	...	...	...	1255 ,,
1914	...	...	...	948 ,,	1922	...	...	...	1312 ,,
1915	...	...	...	1219 ,,	1923	...	...	...	1414 ,,
1916	...	...	...	1351 ,,	1924	...	...	...	1464 ,,
1917	...	...	...	1544 ,,	1925	...	...	...	1361 ,,
1918	...	...	...	1472 ,,	1926	...	...	...	1600 ,,
					1927	...	...	...	1761 ,,

The notifications of Tuberculosis of organs other than the lungs since 1914—the first full year after the commencement of notification—were as follows :—

1914	...	...	...	458 cases.	1921	...	...	...	254 cases
1915	...	...	...	373 ,,	1922	...	...	...	275 ,,
1916	...	...	...	433 ,,	1923	...	...	...	308 ,,
1917	...	...	...	492 ,,	1924	...	...	...	341 ,,
1918	...	...	...	387 ,,	1925	...	...	...	292 ,,
1919	...	...	...	234 ,,	1926	...	...	...	237 ,,
1920	...	...	...	253 ,,	1927	...	...	...	207 ,,

Table H which follows, gives a comparison of the death rates from All Forms of Tuberculosis and Respiratory Tuberculosis in England and Wales and the 16 other large towns, showing the percentage reduction in each case from 1918 to 1927. The Chart which accompanies the table shows very graphically the rise during the war years and the subsequent fall. Sheffield's improved position is clearly indicated.

It will be seen that in 1927 Sheffield's death rate from Tuberculosis was less than that of any other town, very considerably less than most of them, and actually less than the death rate for England and Wales.

The percentage reduction in Sheffield's death rate from Respiratory Tuberculosis during the past 10 years is also the highest of any town, and much higher than that for England and Wales.

These results are particularly gratifying in view of the nature of the principal industries of Sheffield. The great improvement in the conditions under which various classes of grinding and abrasive industries are now carried out, and the detection and treatment of early cases under the Silicosis Regulations, must be an important factor in the remarkable reduction of mortality which has occurred since 1916. Nevertheless, the conditions under which many of the men in the cutlery trade are employed are still profoundly unsatisfactory. They will never, in my opinion, be as they should be until the present antiquated organisation of this trade is reformed, and the system of giving out work to the lessees of little, dark, insanitary "wheels" is abandoned in favour of large and economically-organised factories, where proper equipment for ventilation, etc., would be provided and adequate supervision made possible.

It is at present impossible to prevent the practice of spitting in these places ; ventilation ducts for the removal of dust are not infrequently blocked up to prevent "draughts," and the "dry-racing" of grindstones is sometimes practised in contravention of the regulations. The system of having three stones run "tandem-fashion" means that men employed on the hindermost stones are often working almost in the dark, which promotes uncleanness and lowers the individuals' resistance to respiratory and other diseases.

The large amount of unemployment which still prevails in these trades, although in other respects so regrettable, has probably had some effect in reducing the amount of Tuberculosis, as a large number of grinders and others employed in the dangerous sections of these trades are not at present exposed to the risk of damage to the lungs which occurs while they are at work.



# TUBERCULOSIS.

MORTALITY PER MILLION LIVING IN  
SHEFFIELD AND THE GREAT TOWNS WITH  
200,000 POPULATION, ALSO ENGLAND AND WALES,  
DURING THE YEARS  
1913 TO 1927.

TUBERCULOSIS - ALL FORMS SHEWN-BLACK.

TUBERCULOSIS-OF THE LUNG SHEWN-RED.

SHEFFIELD. •••••••••••••

ENGLAND AND WALES. — — —

GREAT TOWNS. - - - - -

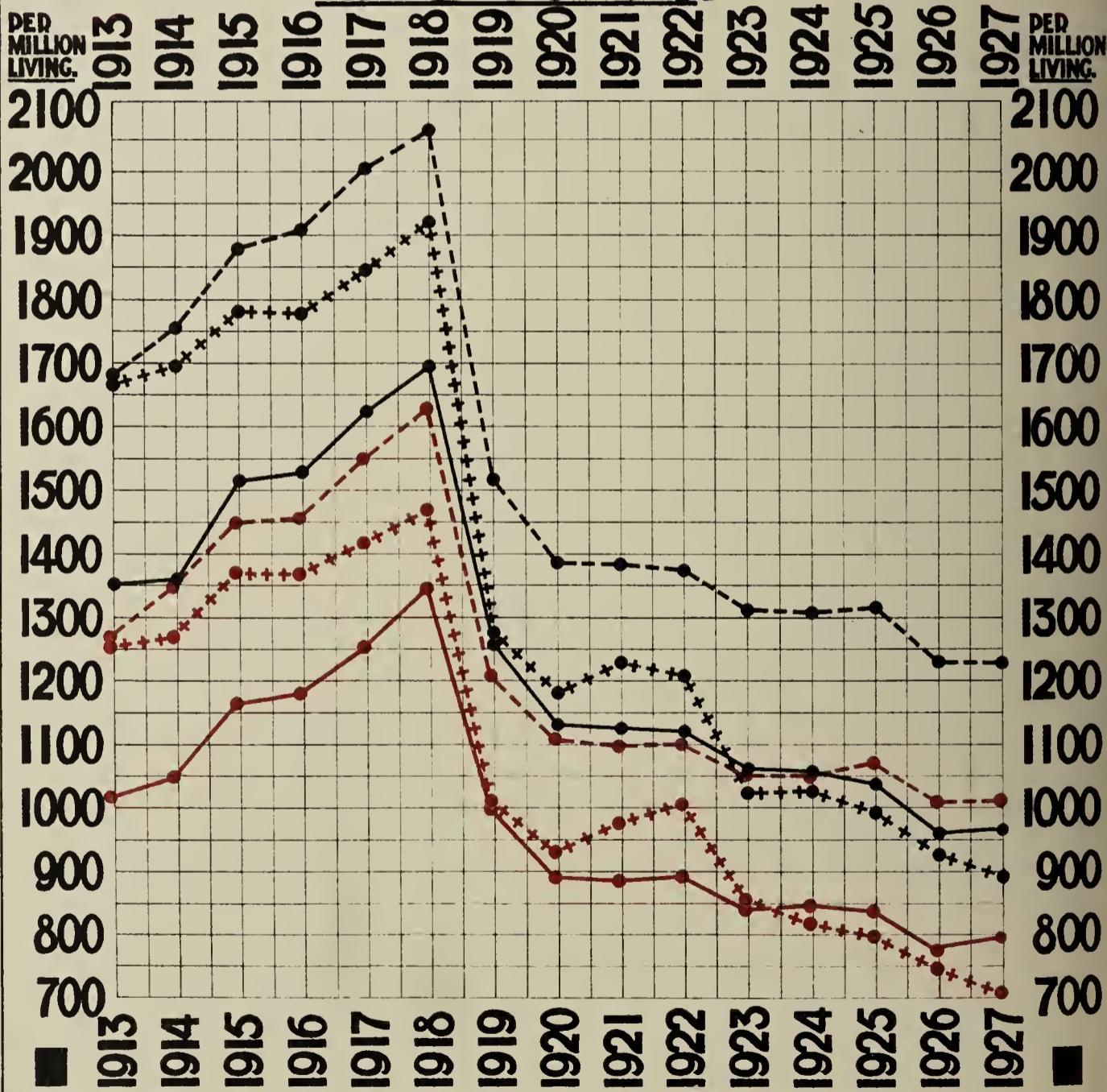


TABLE H.—Tuberculosis, All Forms, and Tuberculosis of the Respiratory System. Mortality per Million Living.  
England and Wales and Towns over 200,000 Population. Years 1918-1927.

Towns	1918			1919			1920			1921			1922			1923			1924			1925			1926			Percentage Reduction 1918-27 All Forms Respy.
	All Forms	All Respy.	All Forms Respy.	All Forms	All Respy.	All Forms Respy.	All Forms	All Respy.	All Forms Respy.	All Forms	All Respy.	All Forms Respy.	All Forms	All Respy.	All Forms Respy.	All Forms	All Respy.	All Forms Respy.	All Forms	All Respy.	All Forms Respy.	All Forms	All Respy.	All Forms Respy.	All Forms	All Respy.	All Forms Respy.	
England & Wales	1694	1343	1258	996	1131	889	1127	884	1121	889	1062	836	1058	841	1038	833	961	771	972	791	42·6	41·1	34·7	34·7	34·7	34·7	34·7	
Birmingham	1604	1354	1358	1162	1093	918	1115	939	1108	931	1067	885	1109	943	1144	953	1097	948	1049	884	34·6	34·6	34·6	34·6	34·6	34·6	34·6	
Liverpool	... 2627	2083	1777	1447	1722	1399	1676	1268	1655	1321	1608	1251	1526	1242	1514	1210	1486	1224	1377	1139	47·6	45·3	35·9	35·9	35·9	35·9	35·9	
Manchester	... 2209	1796	1627	1331	1492	1218	1653	1319	1602	1275	1534	1245	1506	1205	1577	1330	1439	1211	1378	1152	37·6	35·3	35·9	35·9	35·9	35·9	35·9	
<b>SHEFFIELD</b>	<b>... 1920</b>	<b>1468</b>	<b>1275</b>	<b>1007</b>	<b>1181</b>	<b>928</b>	<b>1228</b>	<b>974</b>	<b>1209</b>	<b>1001</b>	<b>1023</b>	<b>851</b>	<b>1027</b>	<b>813</b>	<b>993</b>	<b>793</b>	<b>925</b>	<b>740</b>	<b>892</b>	<b>703</b>	<b>53·5</b>	<b>52·1</b>	<b>52·1</b>	<b>52·1</b>	<b>52·1</b>	<b>52·1</b>	<b>52·1</b>	
Leeds	... 2264	1660	1683	1291	1538	1211	1383	1091	1416	1129	1371	1068	1410	1088	1294	1068	1241	991	1168	957	48·4	42·3	42·3	42·3	42·3	42·3	42·3	
Bristol	... 1801	1514	1340	1102	1215	985	1100	935	1323	1060	1209	949	1137	917	1200	946	1158	952	1203	1029	33·2	32·0	32·0	32·0	32·0	32·0	32·0	
West Ham	... 2085	1689	1462	1167	1303	1091	1274	1013	1193	957	1177	951	1191	970	1174	970	1143	953	1107	945	46·9	44·0	44·0	44·0	44·0	44·0	44·0	
Hull	... 2251	1693	1523	1087	1317	984	1443	1086	1412	1017	1233	983	1354	1071	1271	1026	1205	1005	1220	964	45·8	43·1	43·1	43·1	43·1	43·1	43·1	
Bradford	... 1760	1440	1358	1128	1125	932	1192	924	1033	779	1069	839	1072	858	1010	806	1029	828	996	798	43·4	44·6	44·6	44·6	44·6	44·6	44·6	
Newcastle	... 2017	1524	1650	1240	1814	1379	1634	1246	1499	1158	1476	1099	1459	1119	1561	1209	1489	1170	1386	1095	31·3	28·1	28·1	28·1	28·1	28·1	28·1	
Nottingham	... 1969	1468	1514	1235	1160	879	1152	901	1247	993	1181	899	1184	943	1208	1009	1086	866	1144	948	41·9	35·4	35·4	35·4	35·4	35·4	35·4	
Stoke-on-Trent	2097	1565	1546	1203	1479	1099	1515	1197	1380	1096	1228	978	1158	896	1323	986	1332	994	1347	1058	35·8	32·4	32·4	32·4	32·4	32·4	32·4	
Portsmouth	... 1765	1450	1268	987	1156	929	1176	906	1175	909	1045	854	1228	1000	1121	867	989	790	1004	784	43·1	45·9	45·9	45·9	45·9	45·9	45·9	
Salford	... 2232	1711	1644	1304	1660	1360	1644	1355	1662	1359	1627	1353	1588	1284	1663	1398	1516	1261	1660	1381	25·6	19·3	19·3	19·3	19·3	19·3	19·3	
Leicester	... 2084	1685	1457	1212	1463	1179	1467	1181	1541	1286	1439	1222	1493	1208	1599	1322	1382	1163	1412	1155	32·2	31·5	31·5	31·5	31·5	31·5	31·5	
Cardiff	... 2267	1896	1639	1296	1605	1336	1534	1238	1568	1287	1693	1340	1521	1247	1515	1308	1263	1077	1543	1277	31·9	32·6	32·6	32·6	32·6	32·6	32·6	
Plymouth	... 2177	1665	1665	1286	1238	990	1301	1051	1352	1093	1321	1067	1275	1032	1192	953	1132	918	1006	860	53·8	48·3	48·3	48·3	48·3	48·3	48·3	

Averages for Towns 2066 1627 1517 1205 1386 1107 1382 1096 1375 1098 1311 1049 1308 1044 1068 1230 1005 1229 1008 40·4 38·1

The whole of the rates figures have been taken from the Registrar General's "Statistical Review," with the exception of those for 1927, which have been obtained from the respective towns.

**TABLE I.—Pulmonary Tuberculosis in Sheffield.—Mortality Rates among Workers in Unhealthy Trades, and among All Persons over 15 (for comparison), during the years 1923, 1924, 1925, 1926 and 1927.**

Trades	Workers employed over 12 years of age (Census 1921).	Mortality from Respiratory Tuberculosis.									
		Number of Deaths					Rate per 1,000				
		1923	1924	1925	1926	1927	1923	1924	1925	1926	1927
Grinders ... ...	4,893	34	35	31	28	38	6·9	7·2	6·3	5·7	7·8
Cutlers ... ...	3,940	12	11	11	12	10	3·0	2·8	2·8	3·0	2·5
Filecutters ... ...	2,011	4	7	2	3	2	2·0	3·5	1·0	1·5	1·0
All persons over 15 years of age in Sheffield (estimate) ... ...	1927—367,572	425	414	398	371	353	1·2	1·1	1·1	1·0	1·0

Figures were taken out for mortality of Grinders, Cutlers, and Filecutters over 18 years of age in 10 years 1901 to 1910, and the Pulmonary Tuberculosis rates were as follows :—

Grinders, 14·8 ; Cutlers, 5·8 ; and Filecutters, 4·9 per 1,000 per annum.

Among the factors in the decline of Tuberculosis in Sheffield, perhaps the most important is the work of your Tuberculosis Officer, Dr. Rennie, and his staff, at the Hospitals and Dispensary. At the latter institution especially, an enormous number of cases of Tuberculosis suspects and contacts are kept under direct and continuous supervision.

The system adopted here differs in some respects from that recommended in the Astor Report and adopted by the Ministry of Health. But under the peculiar circumstances of Sheffield the methods which have been evolved appear to have justified themselves.

Other forms of Tuberculosis are treated by Dr. C. Lee Pattison at the admirably equipped King Edward VII. Sanatorium, and also as out-patients at the Tuberculosis Dispensary, Queen's Road. The results obtained at these institutions are responsible for the saving of many young lives and the prevention of much otherwise inevitable crippledom, and have a marked influence on the reduction of our death rate. A detailed report on this work is given by Dr. Pattison under the heading of Prevention and Treatment of Tuberculosis.

**INFANT MORTALITY.**—The number of deaths of Infants under one year of age was 774, as compared with 712 in 1926, 788 in 1925, 871 in 1924, 915 in 1923, 884 in 1922, and 1,173 in 1921. The number of births registered in 1927 was 8,526. Infant Mortality is usually recorded as the number of deaths occurring under the age of twelve months per 1,000 births registered during the same period, and the rate for 1927 calculated in this manner is 91 per 1,000, 12 per 1,000 higher than in 1926, when the rate was the lowest on record, the next lowest being 82 for 1922.

Deaths of infants occurring before the first month of life was reached numbered 344. This gives a rate of 40 per 1,000 births registered, or what is known as the neo-natal mortality. The neo-natal mortality for 1926 was 23 ; for 1925, 37 ; for 1924, 44 ; for 1923, 39 ; for 1922, 39 ; and for 1921, 41.

The following table gives alongside the Infant Mortality rates for England and for Sheffield during the past 20 years. The noteworthy feature of the comparison is that the rate for Sheffield in recent years has usually more nearly approached the English rate than it did in the first decade of the century.

TABLE J.—*Infant Mortality.*

Year	Infant Mortality Sheffield	Mortality England	Excess over English Rate	Year	Infant Mortality Sheffield	Mortality England	Excess over English Rate
1908	141	120	21	1918	128	97	31
1909	119	109	10	1919	96	89	7
1910	127	105	22	1920	104	80	24
1911	141	130	11	1921	99	83	16
1912	107	95	12	1922	82	77	5
1913	128	108	20	1923	90	69	21
1914	132	105	27	1924	90	75	15
1915	133	110	23	1925	85	75	10
1916	109	91	18	1926	79	70	9
1917	104	96	8	1927	91	70	21

If the principal causes of deaths of infants, as set forth in the following table, be examined, it will be seen that the usual fluctuations in the fatality of some of the more common infectious diseases took place. For these annual fluctuations we are at present unable to account, and we are largely powerless to control them. The year's experience, however, proves yet again that as causes of mortality among young children, Scarlet Fever and Diphtheria have become negligible as compared with Measles and Whooping-cough. This fact has long been recognised by the medical profession, but the public persists in believing that Measles and Whooping-cough, the deadliest scourges of infancy, may be regarded as trivial complaints. Scarlet Fever and Diphtheria, on the other hand, still inspire all the horror which was justified a generation ago, but which modern treatment and other factors have rendered unnecessary.

This failure to appreciate facts is a serious handicap to preventive work. The control of Measles is especially difficult owing to the fact that it is infectious for some days before the rash appears, and of Whooping-cough because of the insidious nature of its onset. But our figures prove, and have proved for years, that the isolation of these diseases is more urgent than that of Scarlet Fever and Diphtheria. Most cases of the former could be successfully treated at home, hospital beds being retained for severe cases requiring institutional treatment, and the majority of beds now retained for their use being devoted to Measles and severe cases of Whooping-cough. The infectious stage of Measles is so much shorter than that of Scarlet Fever, that a much larger number of cases could be isolated and protected from complications, with a proportionate saving of young lives.

Taking Influenza, Bronchitis and Pneumonia as one group, there was a steady decline in the number of deaths in recent years. The figures for 1927, however, are considerably higher.

The differentiation between Pneumonia and Bronchitis in infants is not of great importance as the terms "Capillary Bronchitis" and "Broncho-pneumonia," at this age, are practically interchangeable.

Deaths from Diarrhoea and Enteritis fell from 105 in 1923 to 67 in 1924, but rose to 109 in 1926. There was a fall in 1927 to 61. Once more the relationship between these diseases and the sub-soil (four-foot) temperature, which used to be so constant, failed to reappear.

Among the most important factors in bringing about this amazing decline in mortality from these causes, I think we must place the wide substitution of dried milk for so-called fresh but highly-contaminated milk, and the educative work carried out by the medical staff and the women inspectors in connection with the child-welfare centres.

Until the methods of the farmers and others concerned in the milk industry have been revolutionised, and consumers have been provided with facilities for storage and education in the handling of milk, I am definitely of the opinion that liquid milk should be banished from the dietary of infants.

The amount of dried milk distributed in each of the last eight years has been as follows:—1920, 223,901 lbs.; 1921, 213,578 lbs.; 1922, 172,138 lbs.; 1923, 139,774 lbs.; 1924, 158,542 lbs.; 1925, 152,019 lbs.; 1926, 139,731 lbs.; and 1927, 123,460 lbs. As against the drop in the sale of dried milk there has been an increase in the sale of other foods, 28,088 lbs. having been retailed during 1927, as against 16,871 lbs. in 1926 and 12,105 lbs. in 1925.

In the following table particulars are given of Infant Mortality from stated causes under one year of age, during the past five years.

**TABLE K.—Infant Mortality in 1923, 1924, 1925, 1926 and 1927.**

Cause of Death	Number of Deaths				
	1923	1924	1925	1926	1927
Measles ... ... ... ...	3	35	7	16	6
Scarlet Fever ... ... ...	...	...	...	...	1
Whooping Cough ... ... ...	61	13	52	9	56
Diphtheria ... ... ...	1	2	2	7	1
Tuberculous Meningitis ... ...	8	3	3	5	7
Abdominal Tuberculosis ... ...	2	2	2	...	1
Other Tuberculous Diseases ...	7	2	1	5	...
Influenza ... ... ...	14	9	7	5	17
Bronchitis ... ... ...	88	69	69	42	59
Pneumonia (all forms) ...	118	134	127	108	136
Diarrhoea and Enteritis ...	105	67	74	109	61
Syphilis ... ... ...	12	13	12	2	6
Congenital Malformation ...	45	42	40	35	46
Premature Birth ... ...	218	248	186	195	184
Atrophy, Debility, and Marasmus ...	76	68	46	54	52
Other Causes ... ... ...	157	164	160	120	141
<b>Totals ... ... ...</b>	<b>915</b>	<b>871</b>	<b>788</b>	<b>712</b>	<b>774</b>

1927 Infant Mortality Rate :—Legitimate, 88; Illegitimate, 157.

As it has been suggested that the reduction of Infant Mortality tends merely to postpone the deaths of feeble and degenerate infants from the first year to a slightly later period, thus prolonging the suffering of the child and increasing the burden of those responsible for it, I have had two tables prepared in order to ascertain whether this is true of our work in Sheffield.

The following Table shows the Infant Mortality Rate, the Mortality Rate from 1 to 5 years, and the General Death Rate in Sheffield for each fifth year from 1897. This covers the period during which our Child Welfare work has been developed.

**TABLE L.—Infant Mortality Rate; Mortality Rate per 1,000 Births amongst Children over 1 and under 5 years of age and General Death Rate each fifth year since 1897.**

Year	Infant Mortality Rate	Mortality Rate per 1,000 Births ages 1-5 years	General Death Rate
1897	196	94	21·2
1902	150	62	16·9
1907	145	87	17·1
1912	107	60	14·3
1917	104	61	14·6
1922	82	44	11·7
1927	91	50	12·3
Percentage of 1897 figures ...	46%	53%	58%

It will be seen that while the Infant Mortality Rate for 1927 has fallen to 46 per cent. of that for 1897, the Death Rate for the age period 1 to 5 years has also fallen to 53 per cent. of that for 1897.

The following table compares the Infantile Death Rate from three principal groups of causes in 1927 and in 1901.

The first group comprises the death rate from prematurity, debility, etc., that is, congenital causes. This group consists almost entirely of the deaths of weakly or degenerate infants with a bad heredity, whose elimination from the racial point of view is desirable. The other two groups comprise deaths from diarrhoeal and respiratory diseases, in both of which cases I have been able to show that there is a much lower correlation with hereditary influences.

The table shows that while deaths attributable to the first group of causes have declined from 79 per 1,000 Births in 1901 to 37 per 1,000 Births in 1927, the deaths from the diarrhoeal group have declined from 55 per 1,000 to 7 per 1,000. It is evident that the great majority of infantile deaths occur among the congenitally undesirable type of children and that our efforts to improve the environment of the children are not causing a deterioration of the race, as has been suggested in certain quarters.

**TABLE M.—Infantile Mortality from All Causes and from Specified Causes grouped.  
Years 1901 and 1927.**

		1901		1927	
		Number of Deaths	Mortality per 1,000 Births	Number of Deaths	Mortality per 1,000 Births
Prematurity	... ... ...	300		184	
Debility	... ... ...	335		52	
Marasmus	... ... ...				
Congenital Malformations	...	83		46	
Convulsions	... ... ...	292		35	
		1010	79	317	37
Diarrhoeal Diseases	... ... ...	706	55	61	7
Pneumonia	... ... ...	160		136	
Bronchitis	... ... ...	169		59	
		329	26	195	23
All Causes	... ... ...	2573	*202	774	91

\*The Infantile Mortality Rate for 1901 (202) was the highest recorded since the year 1871.

## REGISTRATION SUB-DISTRICTS AND SECTIONS.

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A full description of the boundaries of the Sections adopted as statistical units was given in the Annual Report for 1923. Owing to the different enumeration areas adopted in connection with the 1921 Census, the boundaries between Broomhall A and B, and Ecclesall North A and B, have had to be slightly altered. The area involved was in one case 12 acres and in the other 3 acres. With these exceptions the areas remain the same.

Table VI gives the estimated population, the density of the population, death rates from all causes and from certain specified causes, infant mortality rates, and birth rates, in each of the statistical areas of the City, and sickness from the notifiable infectious diseases is given in Table XVIII.

With regard to mortality in the statistical areas, while the boundaries of the areas as given in the tables do not accurately conform to the different residential and industrial portions of the City, it will nevertheless be seen that the death rates are, on the whole, higher in the over-crowded and smoky industrial neighbourhoods than in the higher class residential parts, where, of course, the standard of living is generally very much better.

## POSITION OF SHEFFIELD AMONGST THE LARGEST TOWNS.

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Table N shows the birth rates, death rates, and infant mortality rates in the 18 largest towns of England and Wales during 1927. The birth rates varied from 22·2 in Liverpool to 14·7 in Bradford. Fourteen of the eighteen towns had higher rates than Sheffield. The death rates vary from 11·0 in West Ham to 14·6 in Bradford. Sheffield ranks fifth lowest with 12·3, tied with Bristol. The infant mortality rates vary from 55 in Portsmouth and Croydon to 99 in Stoke-on-Trent. Fourteen of the towns have lower rates than Sheffield.

**TABLE N.—*Birth Rates and Death Rates in Towns with 200,000 Population for the year 1927.***

Town	Population	Crude Birth Rate per 1,000	Crude Death Rate per 1,000	Infant Mortality
Birmingham ... ... ...	†969,752	17·8	11·5	75
Liverpool ... ... ...	†856,266	22·2	13·9	94
Manchester ... ... ...	†764,420	17·1	13·8	86
<b>SHEFFIELD</b> ... ... ...	‡524,900	<b>16·2</b>	<b>12·3</b>	<b>91</b>
Leeds ... ... ...	‡477,600	16·3	13·0	81
Bristol ... ... ...	*‡385,700	16·3	12·3	57
West Ham ... ... ...	‡315,400	19·0	11·0	67
Hull ... ... ...	‡296,600	21·0	13·2	82
Bradford ... ... ...	‡293,200	14·7	14·6	94
Newcastle ... ... ...	*‡288,500	18·7	12·4	88
Stoke ... ... ...	‡276,900	21·2	13·4	99
Nottingham ... ... ...	‡265,700	17·4	14·1	81
Salford ... ... ...	‡247,600	17·4	13·9	81
Leicester ... ... ...	‡245,000	16·2	12·4	75
Portsmouth ... ... ...	*‡232,100	17·1	12·7	55
Cardiff ... ... ...	‡225,600	18·1	12·6	80
Croydon ... ... ...	‡211,700	15·0	11·6	55
Plymouth ... ... ...	†211,650	16·5	12·0	61

\* Excluding non-civilians.

† Local Estimate.

‡ Registrar General's Estimate.

## STATISTICAL TABLES.

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**TABLE I.—Population, Estimated Increase or Decrease, and Natural Increase, 25 Years.**

YEAR.	Estimated Mean Population (per Registrar-General.)	Estimated Increase or Decrease.	Excess of Births over Deaths.
1903	418,906	+ 4,400	6,160
1904	423,355	+ 4,449	6,526
1905	427,850	+ 4,495	5,576
1906	432,395	+ 4,545	5,945
1907	436,986	+ 4,591	6,353
1908	441,630	+ 4,644	6,931
1909	446,321	+ 4,691	6,198
1910	451,065	+ 4,744	6,238
1911	455,817	+ 4,752	5,288
*1912	466,408	+ 10,591	6,226
1913	471,662	+ 5,254	5,842
*1914	476,971	+ 5,309	5,214
1915	476,012	- 959	3,966
1916	465,494	- 10,518	4,752
1917	469,293	+ 3,799	4,134
1918	465,217	- 4,076	1,014
1919	473,695	+ 8,478	3,789
1920	492,700	+ 19,005	6,508
*1921	519,239	+ 26,539	5,623
1922	522,600	+ 3,361	4,707
1923	524,200	+ 1,600	4,183
1924	525,000	+ 800	3,602
1925	526,900	+ 1,900	3,243
1926	523,300	- 3,600	3,086
1927	524,900	+ 1,600	2,090

\* City extended October 31st, 1901; April 1st, 1912; October 1st, 1914; and November 9th, 1921.

**TABLE II.—Registration Sub-Districts and parts of Registration Sub-Districts, together with the Municipal Wards or parts contained therein.**

Registration Sub-Districts.				Municipal Wards.
Sheffield North	...	...	...	St. Philip's.
Sheffield South	...	...	...	St. Peter's (part); Crookesmoor (small part containing *64 persons).
Sheffield Park	...	...	...	Park.
Brightside West	...	...	...	Brightside (part); Burngreave (part); Neepsend.
Brightside East	...	...	...	Brightside (part); Burngreave (part).
Attercliffe	...	...	...	Attercliffe (part).
Darnall	...	...	...	Darnall.
Handsworth	...	...	...	Handsworth.
Tinsley (part of S.E. R'ham.)	...	...	...	Attercliffe (part).
Hillsbro'	...	...	...	Hillsbro' (part).
Bradfield (part)	...	...	...	Hillsbro' (part).
Ecclesfield	...	...	...	Hillsbro' (part); Neepsend (part); Brightside (part).
Ecclesall North	...	...	...	Walkley; Hillsbro' (part).
Ecclesall West Central	...	...	...	Crookesmoor (part); Hallam; St. Peter's (small part containing *36 persons).
Ecclesall South (including Norton)	...	...	...	Ecclesall; Heeley.
Broomhall	...	...	...	Broomhall; Sharrow.

\* Census 1921.

**TABLE III.—Marriages and Marriage Rates in Sheffield and in England and Wales since 1890.**

Year.	Total Number of Marriages in Sheffield.	Persons married per 1,000 in Sheffield.	Persons married per 1,000 in England and Wales.
1890	3,174	19·7	15·5
1891	3,128	19·2	15·6
1892	3,091	18·7	15·4
1893	2,797	16·6	14·7
1894	3,215	18·8	15·0
1895	2,810	16·2	15·0
1896	3,322	18·8	15·7
1897	3,465	19·3	16·0
1898	3,496	19·2	16·2
1899	3,663	19·8	16·5
1900	3,508	18·7	16·0
1901*	3,640	18·8	15·9
1902	3,682	17·8	15·9
1903	3,506	16·7	15·7
1904	3,507	16·5	15·3
1905	3,466	16·2	15·3
1906	3,943	18·2	15·7
1907	4,004	18·3	15·9
1908	3,419	15·5	15·1
1909	3,445	15·4	14·7
1910	3,639	16·1	15·0
1911	3,726	16·3	15·2
1912*	3,885	16·7	15·5
1913	4,077	17·3	15·5
1914*	4,062	17·0	15·9
1915	4,905	20·6	19·3
1916	4,256	18·3	14·9
1917	3,968	15·2	13·8
1918	4,066	15·6	15·3
1919	4,947	20·1	19·7
1920	5,075	20·6	20·1
1921*	4,089	16·3	16·9
1922	3,774	14·4	15·7
1923	3,990	15·2	15·2
1924	3,951	15·1	15·3
1925	3,987	15·1	15·2
1926	3,660	14·0	14·3
1927	4,164	15·9	15·7
Average	3,750	17·3	15·8

\* City extended

**TABLE IV.—Population and Births and Deaths in Sheffield in past years. Also Birth-rates and Death-rates in Sheffield and in England and Wales.**

YEAR.	POPULA-TION.	SHEFFIELD.				ENGLAND.	
		BIRTHS.		DEATHS.		Birth-rates.	Death-rates
		Number of Births.	Birth-rates per 1,000 living per annum.	Number of Deaths.	Death-rates per 1,000 living per annum.		
1851	135,310	5,946	41·6	4,027	28·2	34·2	22·0
1861	186,375	7,561	40·5	4,610	24·7	34·6	21·6
1871	241,506	9,674	40·4	6,843	28·3	35·0	22·6
1881	284,508	10,814	38·0	5,909	20·7	33·9	18·9
1891	325,547	11,862	36·4	7,775	23·9	31·4	20·2
*1901	410,151	12,766	33·0	7,891	20·4	28·5	16·9
1902	414,506	13,938	33·6	7,064	17·0	28·5	16·3
1903	418,906	14,136	33·6	7,976	19·0	28·5	15·5
1904	423,355	13,850	32·7	7,284	17·2	28·0	16·3
1905	427,850	13,082	30·6	7,510	17·6	27·3	15·3
1906	432,395	13,420	31·1	7,475	17·3	27·2	15·5
1907	436,986	14,125	32·3	7,772	17·8	26·5	15·1
1908	441,630	14,268	32·3	7,337	16·6	26·7	14·8
1909	446,321	13,296	29·8	7,098	15·9	25·8	14·6
1910	451,065	12,664	28·1	6,426	14·2	25·1	13·5
1911	455,817	12,623	27·7	7,335	16·1	24·4	14·6
*1912	466,408	12,887	27·7	6,661	14·3	23·8	13·3
1913	471,662	13,288	28·2	7,446	15·8	23·9	13·8
*1914	476,971	13,004	27·3	7,790	16·3	23·8	14·0
1915	476,012	12,139	25·5	8,173	17·2	21·8	15·7
1916	465,494	12,014	23·7	7,262	15·6	20·9	14·4
1917	469,293	11,026	21·1	6,892	14·7	17·8	14·4
1918	465,217	10,746	20·6	9,732	20·9	17·7	17·6
1919	473,695	10,353	21·0	6,564	13·9	18·5	13·7
1920	492,700	13,130	26·6	6,622	13·4	25·5	12·4
*1921	519,239	11,907	23·8	6,284	12·5	22·4	12·1
1922	522,600	10,804	20·7	6,097	11·7	20·4	12·8
1923	524,200	10,195	19·4	6,012	11·5	19·7	11·6
1924	525,000	9,712	18·5	6,110	11·6	18·8	12·2
1925	526,900	9,321	17·7	6,078	11·5	18·3	12·2
1926	523,300	9,013	17·2	5,927	11·3	17·8	11·6
1927	524,900	8,526	16·2	6,436	12·3	16·7	12·3

Population at earlier dates :—1736, 14,105 ; 1801, 45,755 ; 1811, 53,231 ; 1821, 65,275 ; 1831, 91,692 ; 1841, 111,091.

\* City extended.

I desire to call particular attention to the above table, as so many people still lament the progressive decline in the Birth Rate, without, as it seems to me, giving adequate consideration to the laws which govern the increase in population.

The table shows that while in 1851, with a Birth Rate of 41·6 and a Rate of Increase, i.e., excess of Birth Rate over Death Rate, of 13·4, the actual increment of population was 1,919, in 1927, with a Birth Rate of only 16·2 and a Rate of Increase reduced to 3·9 the actual increment was no less than 2,090.

This, of course, is because these rates have to be applied to an enormously increased population. Had the Birth Rate which prevailed in 1851 been maintained in 1927, the actual number of Births would have been 21,844 instead of 8,526.

Under existing social conditions I cannot understand that such an influx of new children could be considered desirable. It would, in my opinion, be inevitably counteracted by a reversion to something like the rates of Infant Mortality which prevailed in the last century.

**TABLE V.—Registration Sub-Districts and Sections. Estimated Population, Acreage, and Density; and Birth-Rates, Death-Rates, and Infant Mortality Rates for the Quinquennium, 1922-1926 and 1927.**

Registration Sub-Districts and Sections.		Estimated Population 1927.	Acreage	Persons per Acre 1927	Birth Rates per 1,000 living.		Death Rates per 1,000 living.		Infant Mortality Rates.		
					1922 to 1926.	1927	1922 to 1926.	1927.	1922 to 1926.	1927.	
North	...	A	5,285	99	53	21.3	18.5	18.8	20.8	106	153
		B	16,629	91	183	27.0	22.6	17.0	17.1	112	146
		C	9,391	68	138	19.3	16.4	12.3	13.6	91	91
South	...	A	13,860	165	84	21.7	19.8	15.0	15.0	105	124
		B	5,306	73	73	24.4	19.6	15.2	12.1	107	77
		C	7,372	118	62	14.5	12.1	11.6	13.4	64	124
Park	...	A	13,032	135	97	23.9	22.3	14.3	12.9	117	103
	...	B	24,896	2,372	10	18.9	29.7	13.0	12.6	81	99
Brightside West	...	A	23,840	325	73	20.7	17.0	12.0	14.1	83	133
		B	29,028	1,764	16	18.7	13.2	9.9	10.1	75	81
Brightside East	...	A	12,868	236	55	23.8	22.3	12.9	14.4	106	132
		B	32,905	1,357	24	21.4	16.7	11.0	11.2	90	75
Attercliffe	...	A	18,751	271	69	23.3	19.4	13.1	13.8	108	107
		B	10,744	159	68	20.0	16.3	12.5	12.0	86	103
Darnall	...	...	37,072	1,040	36	21.4	18.7	10.4	11.5	81	98
Handsworth	...	...	17,001	3,566	5	23.0	18.0	11.2	12.0	72	108
Tinsley	...	...	7,192	1,524	5	18.2	13.5	8.9	8.8	76	82
Hillsborough	...	...	20,382	1,521	13	15.2	11.6	10.3	11.8	69	68
Ecclesfield	...	...	5,080	2,331	2	15.8	16.3	9.8	11.0	88	36
Ecclesall North	...	A	10,826	210	52	22.9	19.3	11.5	10.8	111	100
		B	27,893	444	63	19.1	14.8	11.0	10.5	75	56
Ecclesall West Central	...	...	51,166	7,588	7	13.9	13.1	10.5	12.5	70	67
Ecclesall South	...	...	49,970	3,613	14	13.5	10.6	9.7	10.4	68	57
Broomhall	...	A	15,489	114	136	19.2	15.5	13.3	14.5	96	79
		B	9,893	251	39	11.6	10.8	11.7	14.4	73	93
Sharrow	...	...	25,354	275	92	14.8	12.3	11.6	12.9	71	58
Norton	...	...	23,675	1,906	12	14.6	12.2	9.4	10.0	69	63
City	...	...	524,900	31,616	17	18.7	16.2	11.5	12.3	85	91

TABLE VI.—Registration Sub-Districts and Sections ; Estimated Population ; Density ; Death-Rates, All Causes

DISTRICT.	NORTH.			SOUTH.			PARK.		BRIGHTSIDE WEST.		BRIGHTSIDE EAST.		ATTERCLIFFE		
	A.	B.	C.	A.	B.	C.	A.	B.	A.	B.	A.	B.	A.	B.	
ESTIMATED POPULATION.	5,285	16,629	9,391	13,860	5,306	7,372	13,032	24,896	23,840	29,028	12,868	32,905	18,751	10,744	
PERSONS PER ACRE ...	53	183	138	84	73	62	97	10	73	16	55	24	69	68	
CAUSES OF DEATH.															
Small Pox ...	...	...	...	...	...	...	...	...	...	...	...	...	0.053	...	
Measles ...	...	...	...	...	...	...	0.153	0.080	0.336	...	...	0.030	0.107	0.093	
Scarlet Fever ...	...	...	0.060	...	0.072	...	0.077	0.080	0.042	0.069	...	0.061	...	0.093	
Diphtheria ...	...	...	0.106	0.072	...	0.271	0.077	0.121	0.084	0.103	0.078	0.091	...	...	
Whooping Cough ...	0.378	0.842	0.319	0.433	0.377	...	0.384	0.281	0.294	0.069	0.544	0.213	0.640	0.465	
Enteric Fever ...	...	0.180	...	...	...	...	...	...	0.042	...	...	0.030	...	...	
Influenza ...	1.135	0.601	0.319	0.216	0.377	0.136	0.460	0.281	0.629	0.482	0.699	0.547	0.747	0.652	
Puerperal Fever...	0.189	0.120	0.213	...	0.188	0.136	0.077	0.121	0.084	0.069	0.078	0.061	...	...	
Diarrhoea and Enteritis	0.568	0.361	...	0.216	0.754	0.271	0.153	0.241	0.168	0.241	0.311	0.213	0.160	0.186	
Pneumonia ...	2.649	2.405	1.065	1.227	2.262	0.950	1.688	1.366	1.384	0.999	2.176	1.276	2.027	1.582	
Cancer ...	1.703	1.564	1.597	1.876	1.131	1.628	0.614	1.165	1.468	1.240	1.243	1.124	1.227	1.675	
Tuberculosis of Respiratory System ...	1.703	1.022	1.171	1.010	1.696	0.407	1.381	0.402	0.797	0.482	0.699	0.851	0.693	0.372	
Other Forms of Tuberculosis...	0.189	0.301	0.106	0.144	0.188	0.271	0.153	0.201	0.252	0.138	0.466	0.122	0.320	...	
Rheumatism, etc. ...	0.189	...	0.213	0.216	0.188	0.136	0.077	0.040	0.126	0.103	0.155	0.030	...	0.186	
Diseases of	Nervous System and Sense Organs ...	1.892	1.082	1.065	1.082	1.319	1.221	0.537	0.803	0.923	0.689	0.622	1.155	1.547	0.838
	Circulatory System	5.866	3.849	3.940	3.968	1.508	2.442	3.069	2.089	2.852	2.411	3.186	2.158	2.826	2.238
	Respiratory System except Pneumonia	0.946	1.744	1.171	1.010	0.565	1.085	1.304	1.004	1.091	0.586	1.010	0.942	0.960	0.655
	Digestive System except Diarrhoea and Enteritis ...	0.378	0.481	0.319	0.433	0.188	0.678	0.230	0.321	0.419	0.310	0.389	0.456	0.427	0.838
	Genito-Urinary System except Venereal Disease ...	0.378	0.481	0.319	0.505	0.754	1.628	0.307	0.201	0.797	0.586	0.311	0.182	0.320	0.378
	Early Infancy ...	0.757	0.902	0.639	1.010	0.188	0.678	0.767	1.526	0.797	0.276	0.699	0.456	0.533	0.465
	Puerperal State except Puerperal Fever ...	...	0.060	...	...	...	0.136	...	0.080	0.210	...	0.061	...	...	
	Suicide ...	0.378	0.120	...	0.072	...	0.407	0.077	0.080	0.126	0.034	0.233	0.030	...	...
	Other affections produced by External Causes ...	0.568	0.180	0.532	0.433	0.377	0.271	0.307	0.522	0.545	0.379	0.544	0.152	0.533	0.655
	Other Causes ...	0.946	0.722	0.532	1.010	...	0.678	0.998	1.567	0.629	0.827	0.933	1.003	0.640	0.655
Death Rates All Causes	20.814	17.079	13.630	15.007	12.062	13.429	12.891	12.572	14.094	10.094	14.377	11.244	13.759	12.02	
Infant Mortality Rates...	153	146	90	124	77	126	103	99	133	81	132	75	107	103	
Birth Rates ...	18.543	22.611	16.505	19.841	19.600	11.801	22.330	29.683	17.030	13.229	22.303	16.654	19.359	16.28	
	A.	B.	C.	A.	B.	C.	A.	B.	A.	B.	A.	B.	A.	B.	
DISTRICT	NORTH			SOUTH			PARK		BRIGHTSIDE WEST	BRIGHTSIDE EAST	ATTERCLIFFE				

and Certain Specified Causes, and Birth Rates per 1,000 living, also Infant Mortality Rates, Year 1927.

DARNALL	HANDSWORTH.	TINSLEY.	HILLSBRO'.	ECCLESFIELD.	ECCLESALL.			BROOMHALL.		SHARROW.	NORTON.	CITY.	DISTRICT.	
	A.	B.	WEST. CENTL.	SOUTH	A.	B.								
072	17,001	7,192	20,382	5,080	10,826	27,893	51,166	49,970	15,489	9,893	25,354	23,675	524,900	ESTIMATED POPULATION
36	5	5	13	2	52	63	7	14	136	39	92	12	17	PERSONS PER ACRE.
CAUSES OF DEATH.														
...	...	...	...	...	...	...	...	...	...	...	...	...	0.002	Small Pox.
027	...	0.139	...	...	0.185	0.036	0.020	...	0.065	...	...	...	0.044	Measles.
081	0.059	0.139	...	0.197	...	0.072	0.039	0.020	...	...	...	...	0.042	Scarlet Fever.
027	0.118	...	0.098	...	...	0.036	0.039	0.100	...	...	0.079	...	0.061	Diphtheria.
351	0.294	...	0.147	...	0.369	0.251	0.156	0.020	0.129	...	0.197	0.211	0.251	Whooping Cough.
081	...	...	...	...	...	...	...	0.040	...	...	...	0.042	0.021	Enteric Fever.
701	0.529	0.278	0.589	...	0.092	0.215	0.391	0.460	0.387	0.404	0.749	0.338	0.478	Influenza.
054	0.235	...	...	...	0.092	0.036	0.020	0.040	0.129	...	...	...	0.059	Puerperal Fever.
243	0.059	...	0.098	...	0.647	0.108	0.137	0.060	...	0.303	0.118	0.169	0.181	Diarrhoea and Enteritis.
214	1.588	1.390	1.374	0.394	1.663	1.040	0.801	0.861	1.937	0.809	0.868	0.803	1.267	Pneumonia.
241	1.353	1.112	1.864	0.787	0.554	1.219	1.857	1.261	1.743	1.921	1.538	1.267	1.387	Cancer.
539	0.471	0.417	0.442	0.197	0.369	0.717	0.762	0.480	1.485	0.708	0.789	0.549	0.703	Tuberculosis of Respiratory System
162	0.294	...	...	...	0.277	0.108	0.254	0.160	0.646	0.101	0.118	0.084	0.189	Other Forms of Tuberculosis.
054	0.118	0.139	0.147	...	...	0.036	0.098	0.180	0.065	0.202	0.079	0.127	0.099	Rheumatism, etc.
782	1.235	1.112	0.834	1.378	0.462	1.040	1.329	0.981	1.033	2.022	1.104	0.887	1.029	Nervous System and Sense Organs.
050	2.176	1.390	2.698	2.953	3.325	2.689	3.147	2.622	3.422	3.740	2.919	2.154	2.749	Circulatory System.
620	0.235	0.556	1.030	0.984	1.108	0.860	0.723	0.520	1.162	0.910	1.065	1.140	0.878	Respiratory System except Pneumonia.
405	0.118	0.139	0.343	0.197	0.092	0.251	0.410	0.360	0.452	0.606	0.473	0.253	0.373	Digestive System except Diarrhoea and Enteritis.
539	0.471	0.139	0.491	1.575	0.462	0.502	0.508	0.580	0.452	0.505	0.789	0.549	0.509	Genito-Urinary System except Venereal Disease.
782	0.647	0.417	0.343	0.394	0.277	0.108	0.391	0.280	0.387	0.505	0.276	0.338	0.528	Early Infancy.
054	0.176	...	0.098	0.591	...	0.072	0.020	0.020	0.065	0.101	0.039	0.127	0.059	Puerperal State except Puerperal Fever.
054	0.118	0.139	0.098	0.197	0.185	0.108	0.156	0.140	0.129	0.101	0.118	0.253	0.112	Suicide.
486	0.647	0.139	0.196	0.787	0.092	0.287	0.469	0.280	0.065	0.202	0.316	0.422	0.375	Other affections produced by External Causes.
971	1.059	1.112	0.883	0.394	0.554	0.753	0.801	0.921	0.775	1.213	1.262	0.253	0.865	Other Causes.
518	11.999	8.760	11.775	11.024	10.807	10.540	12.528	10.386	14.526	14.354	12.897	9.968	12.261	Death Rates All Causes.
98	108	82	68	36	100	56	67	57	79	93	57	63	91	Infant Mortality Rates.
693	17.999	13.487	11.628	16.339	19.305	14.807	13.056	10.586	15.495	10.816	12.385	12.165	16.237	Birth Rates.
DARNALL	HANDSWORTH.	TINSLEY.	HILLSBRO'.	ECCLESFIELD.	A.	B.	WEST. CENTL.	SOUTH	A.	B.	SHARROW.	NORTON.	CITY.	DISTRICT.
					ECCLESALL.				BROOMHALL.					

**TABLE VII.—Infant Mortality ; Nett Deaths from stated causes at various ages under One Year, 1927.**

CAUSES OF DEATH	Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	4 weeks and under 3 months.	3 months and under 6 months.	6 months and under 9 months.	9 months and under 12 months.	Total deaths under 1 year.
Small-Pox ... ... ... ...	...	...	...	1	1	...	...	...	...	1
Chicken-Pox ... ... ... ...	...	...	...	...	...	...	...	...	...	...
Measles ... ... ... ...	...	...	...	...	...	...	2	1	3	6
Scarlet Fever ... ... ... ...	...	...	...	...	...	...	...	...	...	1
Whooping Cough ... ... ... ...	...	...	...	...	...	6	12	15	23	56
Diphtheria ... ... ... ...	...	...	...	...	...	...	...	...	1	1
Influenza ... ... ... ...	1	2	3	2	4	2	4	2	6	17
Tuberculosis of Nervous System ...	...	...	...	...	1	2	1	3	7	
Tuberculosis of Intestines and Peritoneum ... ... ... ...	...	...	...	...	...	...	...	...	1	1
Other Tuberculous Diseases ...	...	...	...	...	...	...	...	...	...	...
Syphilis ... ... ... ...	...	...	2	2	3	...	...	...	1	6
Meningitis (not Tuberculous) ...	...	...	...	...	...	...	...	...	1	1
Convulsions ... ... ... ...	6	6	2	2	16	6	5	3	5	35
Bronchitis ... ... ... ...	1	1	5	7	15	12	11	14	59	
Pneumonia ... ... ... ...	2	3	4	11	21	22	44	38	136	
Inflammation of Stomach ...	...	1	...	1	1	1	...	...	...	2
Diarrhoea and Enteritis ...	1	5	5	12	17	16	6	10	61	
Rickets ... ... ... ...	...	...	...	...	...	...	...	1	...	1
Hernia, Intestinal Obstruction ...	...	1	...	...	1	2	...	1	3	7
Congenital Malformations ...	19	7	3	...	29	10	5	2	...	46
Congenital Debility and Sclerema ...	13	3	8	3	27	13	7	3	2	52
Icterus ... ... ... ...	2	1	...	3	...	...	...	...	...	3
Premature Birth ... ... ... ...	125	20	14	7	166	17	1	...	...	184
Injury at Birth ...	8	1	...	9	...	...	...	...	...	9
Diseases of Umbilicus ...	2	1	...	3	1	...	...	...	...	4
Atelectasis ... ... ... ...	11	...	1	2	14	...	...	...	...	14
Suffocation, Overlying ...	6	1	1	...	8	1	...	...	...	9
Other Causes ... ... ... ...	15	12	2	2	31	4	6	9	5	55
All Causes ... ... ... ...	212	63	40	29	344	120	94	99	117	774
Number uncertified ... ... ... ...	...	...	...	...	...	...	...	...	...	Nil.

Net Births in the Year :—

Legitimate ... 8,181.  
Illegitimate ... 345.

Net Deaths in the Year :—

Legitimate Infants ... 720.  
Illegitimate Infants ... 54.

**TABLE VIII.**—Deaths and Death-rates per annum per 1,000 persons living, from All Causes and from Specified Causes; Persons living; Deaths and Death-rates at Specified Age Periods during 1927.

**TABLE IX.**—*Mortality at certain age periods, years 1923-27.*

AGE GROUPS.	DEATH RATE PER 1,000 PERSONS LIVING AT EACH AGE OF GROUP.				
	1923.	1924.	1925.	1926.	1927.
Under 1 year ... ...	78·7	74·8	67·4	61·3	66·5
<i>Infant Mortality Rate*</i> ...	90	90	85	79	91
1 and under 2 years ...	21·4	20·7	16·0	16·6	19·0
2 „ 3 „ ...	12·3	10·9	11·8	10·1	10·4
3 „ 4 „ ...	6·4	6·4	6·1	6·2	7·3
4 „ 5 „ ...	2·6	2·5	3·4	4·3	4·2
Total under 5 years ...	26·8	25·4	22·9	21·6	23·5
5 and under 10 years ...	1·8	2·2	2·1	2·5	2·3
10 „ 15 „ ...	1·6	1·8	1·5	1·6	1·5
15 „ 20 „ ...	2·4	2·5	2·7	2·8	2·3
20 „ 25 „ ...	3·2	3·3	2·8	2·9	3·6
25 „ 35 „ ...	3·5	3·9	3·8	3·4	3·5
35 „ 45 „ ...	6·1	5·7	5·0	5·1	5·1
45 „ 55 „ ...	11·1	11·2	12·4	11·0	13·0
55 „ 65 „ ...	25·4	27·4	26·1	25·8	29·0
65 „ 75 „ ...	62·9	61·6	65·2	64·2	73·3
75 years and over ...	148·9	159·8	174·5	184·5	185·9
All Ages ... ...	11·5	11·6	11·5	11·3	12·3

\* Deaths of infants under One Year per 1,000 births.

**TABLE X.**—*Cases of Infectious Disease notified during each month of the year 1927.*

DISEASES.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	TOTALS.
Small Pox ... ...	316	155	64	29	30	20	11	12	3	9	11	7	667
Scarlet Fever ... ...	132	116	162	132	181	171	225	452	406	458	376	292	3,103
Diphtheria ... ...	119	81	77	57	55	50	49	54	69	81	87	86	865
Typhoid Fever ... ...	4	2	2	2	5	2	6	6	4	5	2	2	42
Measles ... ...	2	...	1	1	2	2	3	5	...	...	6	11	33
Erysipelas ... ...	34	26	35	21	15	31	24	14	26	23	40	30	319
Ophthalmia Neonatorum ...	9	12	14	7	10	19	6	10	4	7	9	7	114
Puerperal Fever ... ...	12	1	10	5	4	6	13	8	9	11	8	8	95
Puerperal Pyrexia ... ...	15	6	11	7	16	8	9	9	9	13	8	12	123*
Pneumonia ... ...	460	635	464	175	164	178	126	99	125	180	204	344	3,154
Cerebro-Spinal Fever ... ...	2	2	1	...	...	1	1	...	1	...	...	1	9
Acute Poliomyelitis ... ...	...	1	...	...	2	...	3	4	4	3	...	...	17
Encephalitis Lethargica ...	3	4	2	2	3	2	...	...	2	3	2	1	24
Polio-encephalitis ... ...	...	...	...	...	...	...	1	...	...	...	...	...	1
Malaria ... ...	1	...	...	...	...	2	...	...	...	1	...	...	4
Dysentery ... ...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals ... ...	1109	1041	843	438	487	492	477	673	662	794	753	801	8,570

\* 16 cases subsequently notified as Puerperal Fever.

Military Cases are included in the above figures.

TABLE XI.—*Cases of Infectious Disease notified since 1917.*

DISEASE	NUMBER OF CASES NOTIFIED.							Annual Averages 10 years 1917-1926.	Cases Notified 1927.
	1917.	1918.	1919.	1920.	1921.	1922.	1923.		
Small Pox ...	... 14	... 11	... 9	... 5	... 7	11	3	4	22
Cerebro-Spinal Fever	... 4	... 6	... 3	6	12	4	9	10	9
Acute Poliomyelitis	... 546	... 610	... 514	862	1,017	1,293	1,488	1,283	1,558
Polio-Encephalitis...	... 55	... 46	... 14	591	689	647	502	820	1,053
Scarlet Fever	... 1,165	... 1,486	1,229	24	47	42	45	40	1,272
Diphtheria ...	... 546	... 610	... 514	17	14	8	9	337	41
Enteric Fever	... 55	... 46	... 7	242	239	255	251	283	48
Encephalitis Lethargica	... 241	... 253	287	72	63	61	79	388	41
Erysipelas ...	... 46	... 51	69	... 72	... 63	... 61	... 79	346	61
Puerperal Fever ...	... 46	... 51	... 69	... 72	... 63	... 61	... 79	388	60
Puerperal Pyrexia...	... 241	... 253	287	72	63	61	79	346	67
Ophthalmia Neonatorum...	299	248	219	302	257	243	228	215	279
Measles ...	6,874	2,972	8,901	†1,155	277	1,358	71	457	865
Pneumonia ...	...	...	*842	1,759	1,275	2,367	2,832	3,347	42
Trench Fever	...	...	(10 mos.) *5	...	...	...	...	...	1
Dysentery ...	...	...	(10 mos.) *5	...	2	1	1	...	...
Malaria ...	...	...	(10 mos.) *78	21	13	7	5	2	16
Continued Fever ...	...	...	(10 mos.) ...	1	...	...	1	4	4
<b>TOTALS</b>	...	9,244	5,683	12,182	5,060	3,912	6,322	5,523	6,395
								6,275	7,250
									8,570

Military Cases are included in the above Table.

\* Made compulsorily notifiable in this year.

† Measles ceased to be compulsorily notifiable 1920.

TABLE XII.—*Measles. Mortality in Males and Females, and under certain age periods; also Mortality Rates, 10 years 1917-1926 and 1927.*

YEARS.	DEATHS.	Rate per 1,000 Persons living.	DEATHS.		AGE AT DEATH.							
			Males.	Females.	Under 1 year.	1 and under 2 yrs.	2 and under 3 yrs.	3 and under 4 yrs.	4 and under 5 yrs.	5 and under 10 yrs.	10 and under 15 yrs.	Over 15 years.
1917 ...	145	0·31	81	64	32	49	29	20	8	5	1	1
1918 ...	53	0·11	25	28	14	12	11	6	2	8	...	...
1919 ...	174	0·37	84	90	50	59	28	16	9	10	1	1
1920 ...	115	0·23	57	58	28	55	14	8	4	6	...	...
1921 ...	41	0·08	25	16	13	18	4	3	...	3	...	...
1922 ...	153	0·29	75	78	40	77	17	8	3	8	...	...
1923 ...	10	0·02	5	5	3	3	3	1	...	...	...	...
1924 ...	114	0·22	60	54	35	45	18	8	1	6	1	...
1925 ...	31	0·06	16	15	7	13	3	4	1	3	...	...
1926 ...	71	0·14	39	32	16	28	15	6	5	1	...	...
Average 10 years 1917-1926	91	0·18	47	44	24	36	14	8	3	5	...	...
1927 ...	23	0·04	11	12	6	8	4	1	2	2	...	...

TABLE XIII.—*Scarlet Fever. Notifications, Percentage of Cases removed to Hospital, Deaths and Percentage Mortality, ten years 1917-1926 and 1927.*

Year ...	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	Average 10 years 1917-1926	1927
Cases Notified ...	1165	1486	1229	862	1017	1293	1488	1334	1283	1557	1271	3103
Percentage of Cases Removed ...	78	90	86	84	91	90	89	91	89	85	87	64
Deaths ...	15	22	8	6	15	27	11	9	6	10	13	22
Percentage Mortality ...	1·3	1·5	0·7	0·7	1·5	2·1	0·7	0·7	0·5	0·6	1·0	0·7

TABLE XIV.—*Whooping Cough. Deaths under Certain Age Periods since 1917.*

AGES	1917.	1918.	1919.	1920.	1921.	1922.	1923.	1924.	1925.	1926.	Average 10 years 1917-1926	1927.
Under 1 year ...	16	123	6	31	55	10	61	13	52	9	38	56
1 and under 2 years ...	20	100	4	18	35	14	39	12	30	6	28	50
2 „ „ 3 „ „ ...	4	28	2	7	9	5	13	2	16	2	9	14
3 „ „ 4 „ „ ...	1	15	1	1	1	...	11	2	8	5	5	7
4 „ „ 5 „ „ ...	4	10	...	5	3	...	2	1	1	3	3	2
Over 5 years ...	1	12	...	...	2	1	6	1	1	...	2	3

**TABLE XV.**—*Diphtheria.—Percentage Mortality in Hospital-treated and Home-treated Cases, 1927.*

	HOSPITAL TREATED.	HOME TREATED.	TOTAL.
Cases Notified ... ... ...	784	81	865
Deaths ... ... ... ...	28	4	32
Percentage Mortality ... ... ...	3·6	4·9	3·7

**TABLE XVI.**—*Sickness from Puerperal Fever and Mortality from Sepsis and Other Accidents of Childbirth per 1,000 Births, 10 years 1918-1927.*

Year ... ... ...	Rate per 1,000 Births.									
	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927
Sickness from—										
(a) Puerperal Fever ...	4·75	6·67	5·48	5·29	5·65	7·75	8·75	8·90	6·66	11·14
(b) Puerperal Pyrexia (from 1-10-26) ...	...	...	...	...	...	...	...	...	11·54§	14·43
Mortality during Puerperium:										
Sepsis (including Phlegmasia Alba Dolens)	1·58	2·61	1·52	1·51	1·76	1·37	2·47	2·25	2·33	3·64
Other Accidents of Childbirth	2·42	2·61	2·51	2·35	1·85	2·65	2·06	2·68	3·66	3·64
Total Childbirth ... ...	4·00	5·22	4·03	3·86	3·61	4·02	4·53	4·93	5·99	7·27

§ The sickness rate for Puerperal Pyrexia is reduced to 7·10 in 1926 and 12·55 in 1927, when the cases afterwards notified as "Puerperal Fever" are deducted.

**TABLE XVII.**—*Cases of Infectious Disease notified during the year 1927 shown under certain age periods.*

NOTIFIABLE DISEASE.	Number of Cases Notified.							
	At Ages-Years.							
	At all Ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and upwards.
Small Pox ... ... ...	667	9	45	343	86	113	68	3
Scarlet Fever ... ... ...	3,103	21	562	2,003	356	147	14	...
Diphtheria ... ... ...	865	9	206	472	105	61	10	2
Typhoid Fever ... ... ...	42	...	...	9	12	16	4	1
Measles ... ... ...	33	...	14	18	...	1	...	...
Erysipelas ... ... ...	319	4	5	26	36	91	111	46
Ophthalmia Neonatorum...	114	114	...	...	...	...	...	...
Puerperal Fever ... ...	95	...	...	...	28	66	1	...
*Puerperal Pyrexia...	123	...	...	...	32	90	1	...
Pneumonia ... ... ...	3,154	332	1,033	598	230	411	354	196
Cerebro Spinal Fever ...	9	2	3	1	1	2	...	...
Acute Poliomyelitis ...	17	3	6	5	1	2	...	...
Polio-Encephalitis...	1	...	1	...	...	...	...	...
Encephalitis Lethargica ...	24	...	...	6	5	8	5	...
Malaria ... ... ...	4	...	...	...	...	4	...	...
Dysentery ... ... ...	...	...	...	...	...	...	...	...
Pulmonary Tuberculosis ...	1,762	...	42	685	361	434	224	16
Other Forms of Tuberculosis	207	9	57	93	30	8	8	2
Totals ... ... ...	10539	503	1,974	4,259	1,283	1,454	800	266

\* 16 Cases subsequently notified as Puerperal Fever.

Military Cases included :—Diphtheria, 1; Pulmonary Tuberculosis, 1.

TABLE XVII.—Cases of Infectious Disease notified during 1927 shown in Registration Sub-Districts and Sections.

NOTIFIABLE DISEASE.										NORTH		SOUTH		PARK		BRIGHTSIDE WEST		BRIGHTSIDE EAST		ATTERCCLIFFE		DARNALL		HANDSWORTH		TINSLEY		HILLSBRO.		ECLESFIELD		ECLESALL NORTH		ECLESALL SOUTH		BROOMHALL		SHARROW		NORTON		CITY		Total Cases removed to Hospital	
Small Pox ...	...	...	1	1	1	...	20	14	6	74	26	138	96	232	28	6	75	124	40	...	2	2	5	...	1	...	...	...	...	667	667														
Scarlet Fever ...	...	...	33	48	31	64	21	51	220	151	210	70	212	94	73	316	97	31	27	8	14	44	237	61	26	160	78	3103	1994																
Diphtheria ...	...	...	15	21	20	37	16	35	11	46	62	53	13	44	18	9	31	27	1	...	1	...	1	...	1	...	39	865	784																
Enteric Fever ...	...	...	1	2	1	...	1	1	...	1	4	1	2	...	4	10	3	...	1	...	1	...	1	...	42	42	25	25																	
Measles ...	...	...	4	1	1	...	5	5	5	18	15	33	6	16	11	4	26	3	12	10	1	6	17	28	29	6	7	9	10	33	8														
Erysipelas ...	...	...	6	9	6	20	1	5	...	1	1	1	2	1	6	5	5	5	3	1	3	1	1	1	1	4	4	4	4	4	41														
Ophthalmia Neonatorum ...	...	...	1	10	1	2	4	1	1	1	6	16	8	5	3	3	2	5	1	3	1	1	1	1	1	1	1	1	1	114															
Puerperal Fever ...	...	...	1	5	3	11	2	1	2	1	6	3	2	5	3	2	5	1	1	1	1	1	1	1	1	1	1	1	1	1															
*Puerperal Pyrexia ...	...	...	3	2	1	59	3	41	28	108	179	195	195	115	179	191	88	391	141	45	63	12	78	121	183	155	87	38	108	83	3154	357													
Pneumonia ...	...	...	42	147	44	97	41	28	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	9														
Cerebro-Spinal Fever ...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	1	...	1	...	1	...	1	...	1	...	2														
Acute Poliomyelitis ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	1	...	1	...	1	...	1	...	1	...	17														
Polioencephalitis ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	2	...	1	...	1	...	1	...	1	...	1	...	1														
Encephalitis Lethargica ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	1	...	1	...	1	...	1	...	1	...	24														
Malaria ...	...	...	3	11	3	5	2	3	9	9	16	10	13	8	9	11	5	10	5	5	3	...	3	3	3	3	3	3	3	4															
Respiratory Tuberculosis ...	20	104	36	74	39	16	70	111	106	98	51	144	60	44	146	52	23	31	5	5	7	17	19	19	19	19	19	19	19	171															
Other Forms of Tuberculosis ...	3	3	11	3	5	2	3	9	9	16	10	13	8	9	11	5	10	5	5	3	...	4	4	4	4	4	4	4	4	207															
Totals ...	130	362	147	371	130	140	292	629	578	641	350	647	535	320	1185	372	179	290	63	238	486	706	642	289	113	433	271	10539	6726																

Military Cases included : Diphtheria, 1 ; Respiratory Tuberculosis, 1.

TABLE XIX.—*Vital Statistics of whole District during 1927 and previous years.*

YEAR.	POPULATION estimated to Middle of each Year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NETT DEATHS BELONGING TO THE DISTRICT	
		Uncorrected Number.	Nett. Number.	Rate.	Number.	Rate.	of Non- residents registered in the District.	Number.	At all Ages. Rate.
							of Resi- dents not registered in the District.		
1922 ...	522,600	10,891	10,804	20.7	6,098	11.7	252	84	6,097 11.7
1923 ...	524,200	10,271	10,195	19.4	6,038	11.5	263	915	6,012 11.5
1924 ...	525,000	9,817	9,712	18.5	6,145	11.7	278	871	6,110 11.6
1925 ...	526,900	9,461	9,321	17.7	6,185	11.7	333	788	6,078 11.5
1926 ...	523,300	9,158	9,013	17.2	6,022	11.5	310	712	5,927 11.3
1927 ...	524,900	8,684	8,526	16.2	6,526	12.4	338	774	6,436 12.3

Note.—This Table is arranged to show the gross births and deaths in the district, and the births and deaths properly belonging to it, with the corresponding rates. The rates have been calculated per 1,000 of the estimated gross population.

TABLE XX.—*Causes of Death at Different Age-Periods in each Sex, during the year 1927.*

TABLE XXX.—*Continued.*

TABLE XX.—Continued.

TABLE XX.—Continued.

TABLE XX.—Continued.

TABLE XX.—Continued.

TABLE XX.—*Continued.*

TABLE XXX.—Continued.

TABLE XX.—*Continued.*

TABLE XXX.—Continued.

TABLE XXX.—Continued.

TABLE XXX.—*Continued.*

TABLE XX.—Continued.

CAUSE OF DEATH.	TOTALS—ALL AGES.			Under 1 year.			2 & under 3 years.			3 & under 4 years.			4 & under 5 years.			TOTALS—UNDER FIVE YEARS.			5 & under 10 years.			10 & under 15 years.			15 & under 20 years.			20 & under 25 years.			25 & under 35 years.			35 & under 45 years.			45 & under 55 years.			55 & under 65 years.			65 & under 75 years.			75 & under 85 years.			85 years upwards.			TOTALS—ABOVE FIVE YEARS.		
	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total																	
<b>DISEASES OF THE DIGESTIVE SYSTEM—Contd.</b>																																																						
120. Acute Yellow Atrophy of Liver	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...																		
121. Hydatid Tumour of Liver	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...																		
122. Cirrhosis of the Liver—																																																						
A. Returned as Alcoholic	4	...	4	...	5	5	...	...	1	...	...	...	...	...	...	...	...	1	1	...	...	1	2	...	...	2	...	1	...	...	...	...	...	4	4	9																		
B. Not returned as Alcoholic	10	...	13	...	6	7	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	1	1	...	...	2	...	1	2	...	...	...	...	6	7	13																		
123. Biliary Calculi	...	...	13	...	6	7	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	1	1	...	...	1	2	...	...	1	2	...	...	6	7	13																		
124. Other Diseases of the Liver	14	...	6	...	8	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	1	1	...	...	2	...	1	1	...	...	...	...	4	1	5																		
125. Diseases of the Pancreas	5	...	4	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...																			
126. Peritonitis without stated cause	...	...	17	...	6	11	...	...	...	...	...	...	...	...	...	...	1	1	...	...	1	1	...	...	2	...	1	1	...	...	5	11	16	...	...																			
127. Other Diseases of the Digestive System	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...																			
<i>Totals—Diseases of the Digestive System...</i>	...	291	161	130	40	31	4	5	3	3	2	2	1	49	42	91	3	2	4	5	4	2	7	3	7	4	13	14	29	14	21	17	14	22	9	5	1	...	112	88	200													
<b>VII.—NON-VENEREAL DISEASES OF THE GENITO - URINARY SYSTEM.</b>																																																						
128. Acute Nephritis (including unspecified under 10 years of age)	...	14	8	6	...	...	...	...	...	...	...	...	...	...	...	...	...	1	2	...	2	1	...	...	1	2	...	...	1	2	...	...	8	6	14	...	...																	
129. Chronic Nephritis (including unspecified over 10 years of age)	...	178	100	78	...	...	...	...	...	...	...	...	...	...	...	...	...	1	2	...	3	6	5	7	5	17	16	25	15	28	22	10	9	3	3	100	78	178																
130. Chyluria	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	2	...	3	6	5	7	5	17	16	25	15	28	22	10	9	3	3	100	78	178																
131. Other Diseases of the Kidney and Annexa	...	11	8	3	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	2	1	3	1	1	...	1	1	...	2	1	3	1	1	...	8	3	11																
132. Calculi of the Urinary Passages	...	3	3	3	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	1	1	...	1	1	...	1	1	...	1	1	...	1	1	...	3	3	3																

TABLE XX.—*Continued.*

TABLE XX.—Continued.

TABLE XX.—Continued.

TABLE XXX.—Continued.

TABLE XXX.—Continued.

TABLE XX.—Continued.

Table XX.—Continued.

CAUSE OF DEATH	TOTALS—ALL AGES.			Under 1 year.			1& under 2 years.			2& under 3 years.			4& under 4 years.			TOTALS—UNDER FIVE YEARS.			5& under 10 years.			10& under 15 years.			15& under 20 years.			20& under 25 years.			25& under 35 years.			35& under 55 years.			55& under 75 years.			75& under 85 years.			85 years upwards.			TOTALS—ABOVE FIVE YEARS.		
	Totals	M.	F.	M.	E.	F.	M.	E.	F.	M.	E.	F.	M.	E.	F.	M.	E.	F.	M.	E.	F.	M.	E.	F.	M.	E.	F.	M.	E.	F.	M.	E.	F.	M.	E.	F.	M.	E.	F.									
<b>EXTERNAL CAUSES—Contd.</b>																																																
198. Homicide by Cutting or Piercing Instruments ...	1	1	...	6	2	4	...	1	1	...	...	...	...	...	...	1	1	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	3	5											
199. Homicide by other means ...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...											
200. Infanticide (under 1 year) ...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...											
201. Fracture (cause not specified) ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...											
202. Other and unstated forms of Accidental Violence ; Execution ...	3	2	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	1	3										
203. Violent Deaths of Unstated Nature and cause ( <i>i.e.</i> Accidental, Suicidal, etc.) ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...										
<i>Totals—External Causes.</i>	256	192	64	8	4	3	3	2	3	5	...	3	2	21	12	33	10	3	3	3	9	1	11	2	19	3	35	7	35	5	23	15	6	10	3	...	171	52	223									
<b>XV.—ILL-DEFINED DISEASES.</b>																																																
204. Sudden Death ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...										
205. Cause of Death unstated or ill-defined—	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...										
(1) Heart Failure (age 1-70)	1	1	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	1	...	1												
(2) Other ill-defined causes...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2													
(3) Cause not specified ...	3	1	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2													
<i>Totals—Ill-defined Diseases</i>	...	3	1	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2	...	2												
<b>GRAND TOTALS ...</b>	...	6436	3482	2954	4523	322	119	110	38	53	40	24	18	23	667	532	1199	69	53	36	47	54	59	91	69	147	132	212	173	475	300	617	401	693	590	376	494	45104	2815	2422	5237							

## CITY HOSPITALS.

Statistics have been furnished by Dr. Egerton H. Williams, Medical Superintendent of the City Hospitals, with regard to hospital treatment during 1927 and previous years, also in reference to bacteriological and other examinations carried out during the year by the staff, as follows :—

TABLE XXI.—*Daily Average Number of Patients in the City Hospitals.*

Year.	Daily Average Number of Cases in each of the City Hospitals.					Total Daily Average Cases in the City Hospitals	Highest Number in any one day.	Date.	Lowest Number in any one day.	Date.
	Lodge Moor.	Redmires Camp.	Crimicar Lane.	Winter Street.	Moor End.	Contact Cottages. Dart Square.	Edmund Road.			
1911	217.7	...	18.8	...	19.2	...	...	255.7	351	191
1912	252.8	...	19.4	20.4 (6 months) 68.8	19.6	...	...	312.2	319	191
1913	348.8	...	24.5	...	24.5	...	...	466.6	559	Jan. 22
1914	335.4	...	27.0	76.0 Entirely under Military control	25.8	...	...	464.2	554	Mar. 5 & 10
1915	303.4	...	78.2	28.7	...	...	...	410.3	506	Nov. 9
1916	203.6	...	91.18	95.7 Military	27.23	...	...	417.7	482	April 29
1917	223.58	...	93.16	111.81 Military	27.96	...	...	456.5	566	Dec. 29 & 30
1918	252.05	...	98.65	90.13 Military	32.75	...	...	473.5	574	Jan. 17
1919	211.56	...	100.36	41.75 *37.31 Consumptives	41.75	...	...	390.98	501	Oct. 23
1920	210.09	...	102.59	92.04 Consumptives	41.76	...	...	446.48	570	May 29
1921	228.85	...	99.9	91.74	40.66	...	...	461.15	563	Dec. 20 & 22
1922	245.4	...	102.0	92.1	40.8	...	...	480.3	562	May 4
1923	261.1	...	106.9	97.2	40.7	...	...	505.9	572	Feb. 8
1924	282.09	...	103.28	102.5	38.18	...	...	526.05	588	June 1
1925	277.5	1.43	107.1	105.32	42.2	...	1.78	535.3	639	Nov. 27
1926	339.86	13.86	107.6	105.04	43.05	...	6.7	616.1	716	Dec. 29
1927	373.48	45.17	108.99	104.14	42.56	1.71	6.07	682.12	843	Jan. 28
										Aug. 18 & 21
										Sept. 8
										Aug. 28
										June 28
										Aug. 30

\* Military Cases—100·76, 6 weeks. Consumptive Cases—60·73, 5 months.

**TABLE XXII.**—*Showing the Notifications, Percentages of Cases admitted, and Death Rate, for the Three Principal Diseases.*

Year.	Notifications.			Percentage of Cases Admitted on Notifications.			Total	Death Rate Calculated on Total completed Cases.
	Scarlet Fever.	Diphtheria.	Enteric Fever.	Scarlet Fever.	Diphtheria.	Enteric Fever.		
1903	2,114	492	345	67·3	44·2	75·2	62·2	5·06
1904	2,906	400	348	76·8	53·3	72·2	67·4	4·4
1905	3,087	407	322	69·5	52·5	71·9	64·6	4·1
1906	4,905	675	390	63·3	50·9	81·0	65·08	4·6
1907	2,358	431	212	72·7	48·4	75·0	65·3	4·9
1908	1,404	438	237	80·6	62·7	75·5	72·9	4·1
1909	1,532	376	175	81·2	66·3	76·2	74·5	3·6
1910	1,356	401	124	78·6	69·3	79·2	78·6	3·7
1911	1,385	505	253	84·5	74·4	80·2	79·7	4·3
1912	1,741	548	164	90·6	77·1	80·4	86·9	3·8
1913	3,512	831	73	68·4	67·7	61·6	68·1	3·3
1914	3,131	846	114	74·8	71·6	72·8	74·1	3·9
1915	2,163	1,006	102	82·9	78·03	84·3	81·38	3·8
1916	847	817	69	87·1	84·7	73·9	85·4	4·4
1917	1,170	545	55	88·4	89·3	83·6	88·5	3·8
1918	1,491	615	45	89·6	91·7	86·6	90·1	3·3
1919	1,230	513	16	85·36	87·9	93·75	86·18	1·8
1920	866	600	25	84·52	88·33	88·0	86·1	2·2
1921	1,013	685	47	90·8	88·46	74·46	89·45	2·2
1922	1,296	648	47	88·96	88·11	68·08	88·19	4·02
1923	1,490	502	42	87·24	91·43	71·42	87·95	1·78
1924	1,332	515	45	89·8	91·4	71·1	89·8	1·74
1925	1,285	825	40	88·4	93·21	72·5	89·9	2·33
1926	1,563	1,055	47	84·5	93·2	63·8	87·6	2·8
1927	3,111	866	44	63·7	90·3	56·8	69·3	1·87

Owing to lack of accommodation, a number of Scarlet Fever cases were not removed.

During the year the type of Scarlet Fever was much more severe than the previous few years, but owing to the valuable results obtained by the use of Scarlet Fever Anti-Streptococcus Serum the mortality rate was only increased to the extent of 0·09%.

TABLE XXIII.—*Average Duration of Patients in Hospital.*

DISEASE.	1917.	1918.	1919.	1920.	1921.	1922.	1923.	1924.	1925.	1926.	Average for 10 years	1927.
	Days.	Days.										
Scarlet Fever ...	46.3	45.4	42.3	46.4	47.5	42.6	44.34	43.7	42.92	43.26	44.47	38.78
Diphtheria ...	34.7	43.5	39.0	40.3	43.2	43.4	52.95	52.06	45.35	57.35	45.18	63.56
Enteric Fever ...	44.3	47.8	59.8	55.3	56.1	61.1	36.7	58.2	58.18	59.59	53.70	45.12
Measles ...	30.1	25.2	29.1	26.8	37.1	28.1	34.8	34.6	28.0	29.2	30.3	29.0
Pneumonia ...	...	...	...	...	...	28.3	30.6	32.62	31.52	31.97	*31.83	35.35
Other Diseases...	24.0	20.8	24.3	25.0	28.1	26.6	27.98	26.2	25.39	28.07	25.64	28.94
Total for all Diseases ...	37.2	38.9	36.0	35.9	38.5	37.5	40.66	38.8	38.18	43.5	38.51	42.03

\* Average for 6 years only.

## BACTERIOLOGICAL WORK CARRIED OUT AT LODGE MOOR HOSPITAL

Bacteriological work has been entirely done by the Resident Medical Officers at Lodge Moor Hospital. Media on which organisms are grown has been prepared in the Laboratory as in previous years.

## EXAMINATIONS CARRIED OUT DURING YEAR 1927.

Swabs (Throat and Nasal) and Statim Smears	4,629
Special Examinations of Urines	24
Blood Examinations	57
Cerebro-Spinal Fluid	15
Pneumonic and Tubercular Sputum	37
Widal Reaction for Typhoid	21
Pleural Effusions	3

## SANITARY ADMINISTRATION.

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### GENERAL SANITARY WORK.

**TABLE XXIV.—Summary of Work done by Sanitary Inspectors during 1927.**

Details of Work done	No. 1 District	No. 2 District	No. 3 District	No. 4 District	No. 5 District	TOTAL
(1) Premises visited on account of Nuisances ... ... ... ...	1,077	1,964	4,693	2,678	2,636	13,048
(2) Premises where Smoke Test applied to Drains ... ... ... ...	272	294	168	220	99	1,053
(3) Premises where Water Test applied to Drains ... ... ... ...	323	598	297	765	338	2,321
(4) Premises where Colour Test applied to Drains ... ... ... ...	116	184	80	139	64	583
(5) Visits to Work in progress ... ...	2,798	4,162	2,153	5,252	2,340	16,705
(6) Miscellaneous Visits ... ...	4,023	5,141	7,047	7,274	7,030	30,515
(7) Interviews with Owners ... ...	194	420	504	532	398	2,048
(8) Nuisances abated ... ...	1,351	2,108	2,357	1,640	2,152	9,608
(9) Yards paved ... ...	79	446	447	260	254	1,486
(10) Visits for Zymotic Diseases ... ...	823	1,227	1,413	1,781	1,031	6,275
(11) Visits for Disinfection of Premises ...	412	739	752	1,177	709	3,789
(12) Visits to Milkshops and Cowsheds ...	—	3	24	31	—	58
(13) Visits to Butchers' Shops and Slaughterhouses ... ...	1,056	731	1,362	3,093	1,102	7,344
(14) Visits to Offensive Trades ... ...	—	72	47	270	200	589
(15) Notices served (a) Statutory ... ...	130	608	1,063	368	212	2,381
Do. (b) Informal ... ...	898	2,495	2,299	2,524	1,714	9,930
(16) Proceedings taken ... ...	—	32	7	7	—	46

In addition to the visits shown at No. 10 in the above Table, 2,749 visits were paid to Small Pox Contacts by the Staff of Women Inspectors.

### HOUSING OF THE WORKING CLASSES.

It is still impracticable to apply all the powers contained in the Housing Acts on account of the impossibility of re-housing those who occupy houses which are unfit for habitation and which ought to be condemned. The following statement shows the result of the action taken :—

Four Representations under the Housing Act, 1925, were made during the year. They had reference to the following properties :—

51, The Dale, Woodseats ; 1 in Court 4, Compton Street ; 2 & 3 in Court 8, Trinity Street and 37, Cavill Road.

Closing Orders were made in respect of all these houses.

Demolition Orders were made with respect to—

1 in Court 4, Compton Street and 51, The Dale, Woodseats.

51, The Dale, Woodseats, has been demolished.

The following statement summarises the action taken under Part II. of the Housing Act, 1925, with regard to Reconstruction Schemes.

Description of Area	Date of Order of Ministry of Health confirming Scheme	Remarks
Duke Street, Crown Alley Lane and Bard Street Area. (41 Houses involved.)	Sept. 22nd, 1926 ...	Area cleared. All tenants gone to Wybourn Estate.
Matthew Street and Queen's Row Area. (101 Houses involved).	Sept. 22nd, 1926	Area cleared. Tenants gone to Wybourn Estate.
River Lane and Creswick Walk Area. (31 Houses involved).	July 6th, 1927.	Property in process of demolition. Tenants gone to Wybourn Estate.
Lambert Street, Furnace Hill and Scotland Street Area. (126 Houses involved).	May 7th, 1928.	Area condemned

Particulars with regard to the work will be found in Table XXVII.

2,112 new houses were certified during the year 1927, as against 2,536 in 1926, 2,050 in 1925, 887 in 1924, 665 in 1923, 979 in 1922, and 1,031 in 1921.

During 1927 there were 4,164 marriages and 2,090 more births than deaths. The overcrowding in the City is still deplorable.

The number of families on the waiting list of the City Treasurer for Municipal houses was, at the time of going to print, 4,000.

Very numerous applications of a most pathetic description are received at this office, of which only a very small number can be entertained. Unfortunately, this has led in many cases to sub-letting by tenants of the Corporation, and already owing to this fact conditions are being created in some of the Corporation Estates which are most undesirable, but which it is impossible for the Treasurer's Department to control until the population can be adequately housed. The City Treasurer is, however, dealing as far as possible, and without avoidable delay, with all cases in which defects or abuse by tenants of the property are reported by the Medical Officer of Health, and is co-operating in every way with the efforts of the Health Department to prevent the development of insanitary conditions.

The following table shows the number of dwelling houses certified for human habitation since 1886, the figures being for the Municipal year ending 31st March—thus the number for the year 1927 means the number certified during the year ended 31st March, 1928.

**TABLE XXV.—Houses Certified since year 1886.**

Year ending March.	Houses Certified	Year ending March.	Houses Certified	Year ending March.	Houses Certified
1886	725	1900	2,876	1914	570
1887	928	1901	2,118	1915	399
1888	806	1902	1,977	1916	397
1889	830	1903	2,051	1917	57
1890	903	1904	1,963	1918	8
1891	692	1905	1,982	1919	78
1892	786	1906	1,904	1920	413
1893	822	1907	1,753	1921	1,165
1894	632	1908	1,778	1922	814
1895	523	1909	1,469	1923	646
1896	1,059	1910	1,243	1924	1,061
1897	1,443	1911	866	1925	2,178
1898	2,273	1912	703	1926	2,714
1899	2,650	1913	542	1927	1,897

The following table shows the number of new houses certified as fit for human habitation by the Chief Building Surveyor during each calendar month from the Armistice to the end of March, 1928.:—

**TABLE XXVI.—Houses certified each month since the Armistice.**

PERIOD	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	
January ...	...	...	...	18	43	81	25	54	95	116	215	46
February ...	...	...	...	9	34	140	100	44	111	111	173	44
March ...	...	...	...	23	119	109	40	48	114	221	238	321
April ...	...	...	...	30	48	99	41	29	165	170	113	...
May ...	...	...	...	2	31	126	58	34	153	228	189	...
June ...	...	...	...	43	70	98	55	84	115	124	172	...
July ...	...	...	...	1	47	172	36	69	173	367	173	...
August ...	...	...	...	17	43	30	35	86	183	47	225	...
September ...	...	...	...	10	122	4	27	65	230	342	300	...
October ...	...	...	...	67	89	54	62	122	257	423	175	...
November ...	...	...	...	6	215	44	44	90	259	258	76	...
December ...	...	1	27	42	170	22	142	162	195	129	63	...

Of the 1,897 houses certified in the last 12 months of the period given in the table, 723 were erected by the Corporation.

During the year under review the work of repaving back yards has received special attention, and 1,486 yards have been completed, 164 more than during 1926. In my opinion this is one of the most important practical sanitary reforms, as it can constantly be seen that when an unpaved and dirty backyard is put in good condition the effect is to improve sanitary conditions and cleanliness of the whole interior of the houses using such yard.

The whole cost of this work falls upon the property owners, and there are many cases of small owners where the expenditure involves considerable hardship or where the money actually cannot be found. This naturally interferes very much with the progress of the work.

The City Council agreed to the recommendation of the Health Committee that in suitable cases this work might be carried out at the cost of the Corporation, and the amount repaid by the owner by instalments to be approved by the Committees concerned. This arrangement has greatly facilitated this most important sanitary reform during the last few years.

TABLE XXVII.—HOUSING.—1927.

## 1. INSPECTION OF DWELLING-HOUSES.

(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ... ... ... ... ... ...	38,217
(2) Number of dwelling-houses (included under Sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 ... ... ... ... ...	—
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ... ... ...	1
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation ... ... ... ...	1
<b>REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICES.</b>	
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers ... ... ...	23,353
<b>REMEDY OF DEFECTS AFTER SERVICE OF FORMAL NOTICES UNDER STATUTORY POWERS.</b>	
<b>A.—Proceedings under section 3 of the Housing Act 1925—</b>	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs ... ... ... ... ...	1
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By owners ... ... ... ... ...	1
(b) By Local Authority in default of owners ... ... ...	—
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	—
<b>B.—Proceedings under Public Health Acts—</b>	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied ... ... ... ...	17,881
(2) Number of dwelling-houses in which defects were remedied after service of formal notices—	
(a) By owners ... ... ... ...	15,621
(b) By Local Authority in default of owners ... ...	1
<b>C.—Proceedings under sections 11, 14 and 15 of the Housing Act, 1925—</b>	
(1) Number of representations made with a view to the making of Closing Orders ... ... ... ...	4
(2) Number of dwelling-houses in respect of which Closing Orders were made ... ... ... ...	5
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit ...	—
(4) Number of dwelling-houses in respect of which Demolition Orders were made ... ... ... ...	2
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders ... ... ...	1



Of the 324 boats inspected, 58 were registered under the Merchant Shipping Acts by the board of Trade. These, with one exception, were found to be in good order, and in compliance with the requirements of the Canal Boats Acts. A letter was sent with regard to the one boat not complying and a reply was received promising attention when the boat returned to Hull.

#### BLACK SMOKE NUISANCE.

A conference between the representatives of the Sheffield and Rotherham Corporations was arranged in February, 1927, for the purpose of setting up a Joint Committee under the "Public Health (Smoke Abatement) Act, 1926."

The Committee was duly appointed and from 1st July, 1927, joint action has been taken in respect of smoke nuisances.

Particulars are given below with regard to the work of the year. The particulars include work in the Rotherham area during the second half of the year.

Proceedings were taken in nine cases as follows :—Seven steel manufacturers, one flour miller and one brewer. The results of the proceedings were as follows :—fines were imposed of £15, £7 10s., £4, £3 10s., 15/-, 2 at 10/- ; in one case an order was made with costs ; one case dismissed.

**TABLE XXVIII.—Details of Work done by Smoke Inspectors during the year 1927.**

Number of observations of chimneys of each one hour	...	...	...	...	...	4,277
Average number of minutes of black smoke per hour	...	...	...	...	...	2·5
Number of complaints received	...	...	...	...	...	49
,,    chimneys erected	...	...	...	...	...	2
,,    chimneys raised	...	...	...	...	...	3
,,    intimations served	...	...	...	...	...	123
,,    notices served	...	...	...	...	...	13
,,    firms visited to advise	...	...	...	...	...	131
,,    proceedings during the year	...	...	...	...	...	9
Total penalties imposed	...	...	...	...	...	£31/15/0
Average of penalties imposed	...	...	...	...	...	£4/10/9

#### CONVERSION OF PRIVIES INTO WATER-CLOSETS.

During the year, 1,598 privies were converted, including 177 abolished where no water-closet was substituted. 114 additional water-closets were provided. The corresponding figures for 1926 were 1,820 and 167 respectively.

The work done under the supervision of this sub-department represents an expenditure during the year 1927 of about £50,000, of which the Corporation's share amounted to £16,000

The number of sanitary conveniences at 31st December, 1927, was approximately as follows :—

(a)	Privies with fixed receptacles	...	...	...	...	...	779
(b)	Privies with movable receptacles (known as pail closets)	...	...	...	...	...	205
(c)	Fresh water closets	...	...	...	...	...	91,887
(d)	Waste water closets	...	...	...	...	...	1,080

The rate of Conversion of Privies during the year 1927 was practically maintained at the standard set in January, 1924, when it was decided to abolish the whole of the privies in Sheffield in 5 years.

There is now however an unavoidable slowing down on account of the facilities for drainage not being available in the outside districts where the work is being carried out.

Full particulars with regard to the work will be found in Table XXIX.



## FACTORIES AND WORKSHOPS.

The number of workshops struck off the register during the year was 278, made up as follows :-					
METAL WORKERS—including filecutters, table blade and other hand forgers, scissors forgers, chasers and engravers in the electro-plate trade					128
WOOD WORKERS—including joiners, cabinet and cabinet case makers					74
MISCELLANEOUS SHOPS—including 2 restaurant kitchens...					76
Total shops struck off register					278

45 Workshops were added to the register. The nett decrease therefore was 233.

The following table shows the number of workshops on the register at the close of the year.—

Bakehouses and confectioners, including factory bakehouses	...	...	...	434
Tailors, dressmakers and milliners	...	...	...	247
Metal workers	...	...	...	346
Wood workers	...	...	...	152
Hand Laundries	...	...	...	16
Restaurant Kitchens	...	...	...	61
Miscellaneous shops	...	...	...	224
Total workshops on register	...	...	...	1,480

Employers in the baking trade report a considerable decrease in the consumption of bread by the public. They also state that Sheffield is no exception, as the whole country shows a like experience, and some of the trade journals have gone so far as to quote figures showing an actual decrease of 25% in the production of flour during the past few years.

During the past year, 66 additional water-closets were provided in 8 factories and 17 workshops, and the drains were relaid in connection with 14 premises and 6 water-closets were reconstructed.

The usual table with regard to inspections and defects found is given below.—

TABLE XXX.—Factories, Workshops and Workplaces.

Premises	Number of		
	Inspections	Written Notices	Occupiers Prosecuted
Factories( including Factory Laundries)	919	106	...
Workshops (including Workshop Laundries)	1,675	151	...
Workplaces	233	38	...
Homeworker's premises	15	6	...
Total	2,842	301	...

Particulars	Number of Defects			Number of offences in respect to which Prosecutions were instituted
	Found	Remedied	Referred to H.M. Inspector	
<i>Nuisances under the Public Health Acts :—</i>				
Want of cleanliness...	101	94	...	...
Want of ventilation	2	2	...	...
Overcrowding	...	...	...	...
Want of drainage of floors	4	4	...	...
Other nuisances	50	45	...	...
Sanitary Accommodation—insufficient	10	8	...	...
unsuitable or defective	29	29	...	...
not separate for sexes	11	7	...	...
<i>Offences under the Factory and Workshop Acts :—</i>				
Illegal occupation of underground bakehouse	(s. 101)	2	2	...
Breach of special sanitary requirements for bakelhouses (ss. 97 to 100)	57	57	...	...
Other offences	35	35	...	...
Total	301	283	...	...

OFFENSIVE TRADES.

REPORT OF THE HEAD WORKSHOPS INSPECTOR ON FISH AND CHIPS SHOPS IN SHEFFIELD

The number of Fish and Chip Friers on the register at the close of 1926 was 469.

The number of existing shops found during the year 1927 and added to the register was 51.

Permission to open new shops was given in respect of 9 applications. 2 of these were definitely abandoned and 1 shop is in course of construction.

3 shops were closed voluntarily during the year leaving a total of 523 shops on the register.

Of the 15 applications made during the year for permission to establish new shops 6 were refused, including 2 travelling vans.

6 shops were closed temporarily during the year.

91 shops or 17.4% changed occupiers during the year.

1,397 visits were made during the year and 550 defects were found in 280 shops. Letters were sent to occupiers and owners and 414 defects were dealt with.

The following table shows the nature of the defects found and dealt with :-

## PREVENTION AND TREATMENT OF TUBERCULOSIS.

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(REPORT BY JOHN RENNIE, M.D., D.P.H., Tuberculosis Medical Officer.)

The number of primary notifications of Tuberculosis of the Lung received during 1927 was 1762 and Other Forms of Tuberculosis 207, giving an incidence rate per 1,000 of the population of 3·36 for Tuberculosis of the Lung, and 0·39 for Other Forms of Tuberculosis.

Table XXXI. shows the number of new cases notified, deaths, and non-notified deaths at the various age periods.

**TABLE XXXI.**

Age-periods	TUBERCULOSIS												
	Notifications (New Cases)				Deaths				Non-notified Deaths				
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
— 1	...	...	3	6	...	...	3	5	...	...	...	...	
— 5	25	17	33	24	3	3	11	16	2	2	2	7	
— 10	297	209	24	37	4	3	5	13	...	...	2	4	
— 15	100	79	11	21	1	2	5	7	...	...	1	1	
— 20	78	90	7	10	10	21	3	7	1	2	...	1	
— 25	79*	114	5	8	22	23	3	3	...	...	...	...	
— 35	111	142	5	3	39	21	6	5	1	1	...	2	
— 45	98	83	...	...	43	18	...	1	1	2	...	...	
— 55	113	26	3	2	76	16	2	2	6	1	1	2	
— 65	71	14	3	...	42	6	1	...	5	1	1	...	
+ 65	9	7	1	1	13	3	...	1	4	...	...	...	
TOTALS	...	981*	781	95	112	253	116	39	60	20	9	7	17

\* Including one military case.

The policy of delaying notification until the finding of tubercle bacilli in the sputum is quite wrong, as we know that the percentage of cases which show permanent arrest when the disease has reached this stage is exceedingly small.

In 338 of the 1,762 cases of Tuberculosis of the Lung, tubercle bacilli were found in the sputum, and the advanced nature of the disease when it has reached the infectious stage is well shown by the fact that 84 of these 338 cases died before the end of the year. These infectious cases, therefore, cannot be considered early Tuberculosis from any point of view.

The number of notifications received is not a criterion of our position as regards Tuberculosis. The principal point is the proportion of cases notified in the early and non-infectious stage of the disease, and if a diagnosis is made at this stage, and treatment given, in a very large proportion of the cases the disease will become permanently arrested. In 19·2 per cent. of the 1927 primary notifications tubercle bacilli were found in the sputum. A large proportion of the remaining 80·8 per cent. of the cases were notified in the early and curable stage of the disease.

Our work is, therefore, directed towards a decrease in the number of infectious cases amongst the primary notifications, and establishing a diagnosis of Tuberculosis in the earliest stage of the disease.

The total number of notified cases on the Register on December 31st, 1927, was 6,028. Of these 1031 (including four children under 15 years of age) were infectious cases, i.e., cases in which tubercle bacilli have been found in the sputum at some period of the illness. No case which at any time has been found to be infectious has so far been cancelled.

91·32 per cent. of the cases of Tuberculosis of the Lung notified during the year were examined by the Dispensary Staff. This figure shows that the patients are anxious to receive the treatment provided by the municipality. Of the remaining 153 cases, 52 were receiving treatment in Institutions other than Corporation Institutions at the time of notification, and of the other 101 cases 52 did not desire treatment, and 49 died prior to or within 14 days of notification.

The primary investigation of all notified cases is carried out by the Male Inspectors.

The Women Inspectors re-visit the homes of the notified cases of Tuberculosis of the Lung, and make reports to the Tuberculosis Medical Officer, thus keeping him in touch with the home conditions of patients whether they are attending the Dispensary or not.

The total number of such visits paid during the year was 14,943. The Tuberculosis Medical Officer receives periodical reports on the visits made by the Women Inspectors, and reviews the whole of the cases on their visiting lists.

The number of deaths from Tuberculosis of the Lung of Sheffield residents occurring in the City during the year was 354, which is equal to 20·09 per cent. of the notifications received. It will be noticed that this figure bears a close relation to the percentage of notifications in which tubercle bacilli were found in the sputum, namely, 19·2. To this number must be added 15 deaths of Sheffield residents occurring outside the City.

The Death-rate for Tuberculosis of the Lung is 0·703 per 1,000 of the population, and for Other Forms of Tuberculosis is 0·189, giving a total Death-rate for the City for All Forms of Tuberculosis of 0·892.

The Death-rate has steadily declined each year since 1922, and the Respiratory Death-rate for 1927 is the lowest ever recorded in the City, and is actually lower than the Death-rate for England and Wales (0·791).

Considering the various adverse factors of a great industrial city like Sheffield, this figure must be considered very satisfactory.

**TABLE XXXII.**—*Deaths from Tuberculosis of the Lung occurring during 1927, divided into sex and age groups, showing whether sputum examined and result.*

AGE PERIODS	Sputum examined				Sputum not examined		TOTALS	
	Tubercle Bacilli found		Tubercle Bacilli not found		Males	Females	Males	Females
	Males	Females	Males	Females	Males	Females	Males	Females
Under 1 year ... ... ...	...	...	...	...	...	...	...	...
1 and under 5 years ... ...	...	1	...	...	3	2	3	3
5 „ 15 „ ...	1	2	1	...	3	2	5	4
15 „ 25 „ ...	26	32	1	2	5	7	32	41
25 „ 45 „ ...	66	30	4	...	8	5	78	35
45 „ 65 „ ...	85	16	7	...	23	5	115	21
65 years and upwards ...	6	2	2	...	6	1	14	3
TOTALS ...	184	83	15	2	48	22	247	107

Table XXXII shows that the diagnosis was confirmed by tubercle bacilli being demonstrated in the sputum in 75·42 per cent. of the cases.

It is very desirable for statistical purposes that the sputum of every case, even though advanced, should be examined.

TABLE XXXIII shows the length of time between notification and death of the 354 deaths of Sheffield residents occurring in the City.

TABLE XXXII.—Deaths from Tuberculosis of the Lung among Sheffield residents occurring in the City during 1927, divided into age periods, showing length of time between notification and death.

It is seen that 26·58 per cent. died before or within one month of notification, and 55·65 per cent. of the total deaths occurred within one year. The percentage dying prior to, or within one month of notification, is still large. It must be recognised, as regards tuberculosis, that in a certain proportion of the cases the disease runs a rapid course.

Of the 27 cases, or 7·63 per cent., who had been notified for six years or over, seven lived six years, five lived seven years, four lived nine years, one lived ten years, two lived eleven years, one lived twelve years, two lived fourteen years, one lived sixteen years, one lived eighteen years, one lived twenty years, one lived twenty-three years, and one lived twenty-five years. In 16 of the 27 cases who lived six years and over after notification, tubercle bacilli had been found in the sputum at least five years previously, viz., in three cases, five years previously, in four cases six years previously ; in two cases seven years previously ; in three cases eleven years previously ; in one case, twelve years previously ; in one case, sixteen years previously ; in one case, twenty years previously ; and in one case twenty-four years previously.

The Dispensary, situate in Queen's Road, is open on week-days from 9.0 a.m. to 5.0 p.m., except on Saturdays, when it is open from 9.0 a.m. to 12.30 p.m., and patients are seen on Mondays Wednesdays and Thursdays in the morning and afternoon, on Tuesdays and Fridays in the afternoon, and on Saturday mornings. There are also two evening sessions (Tuesday and Friday), from 6.0 p.m. to 8.0 p.m., for the convenience of patients who are working. There is no branch Dispensary.

During the year I was assisted by Dr. N. Keating, Dr. J. R. Liddell, Dr. J. Hay Campbell, Dr. F. Barnes, Dr. A. Meiklejohn and Dr. T. S. Townsend.

The Staff consisted of five Male Inspectors, two Male Clerks, two Female Clerks, two Junior (Male) Clerks, and five Female Clerk-attendants. One Inspector acts as Radiographer, and a second does laboratory work.

The revisiting of the notified cases is carried out by the Women Inspectors. It is estimated that the whole time of five Inspectors is taken up by this work.

#### PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.

No action was taken under the above Regulations with regard to tuberculous employees in the Milk Trade.

#### PUBLIC HEALTH ACT, 1925, SECTION 62.

No action was taken under this Section with regard to compulsory removal to hospital.

#### ATTENDANCES AT THE DISPENSARY.

Patients who attend the Dispensary may be divided into (a) Cases seen for the first time, and (b) Old Cases.

#### NEW CASES.

Table XXXIV. gives particulars of the cases at the time of their visit to the Dispensary and the result of the primary examination arranged under three headings, viz., (a) Cases notified prior to their first attendance at the Dispensary ; (b) "Suspects" ; (c) "Contacts."

#### OLD CASES—NOTIFIED.

The total number of notified cases who attended the Dispensary for treatment and supervision during the year was 4,977, and on December 31st, 1927, there remained on treatment and supervision, 4,268. In addition 1,760 cases remained on General Supervision. The total number of attendances of notified cases made during the year was 38,349.

Every effort is made by the Dispensary Staff to keep in touch with the notified cases.

**TABLE XXXIV.**—*Giving particulars of new cases examined during year and result of primary examination.*

SEX AND AGE PERIODS	(a) Notified Cases		(b)—“Suspects.”			(c)—“Contacts.”		
	Number examined	Number examined	Put on Observation	Found not Tuberculous	Number examined	Put on Observation	Found not Tuberculous	
<b>ADULTS (15 years and upwards)—</b>								
Males ... ... ...	206	817	765	52	373	89	284	
Females ... ... ...	196	695	629	66	440	114	326	
<b>TOTAL ADULTS</b> ... ...	<b>402</b>	<b>1,512</b>	<b>1,394</b>	<b>118</b>	<b>813</b>	<b>203</b>	<b>610</b>	
<b>SCHOOL CHILDREN (5 years and under 15)—</b>								
Males ... ... ...	78	585	555	30	324	129	195	
Females ... ... ...	57	407	380	27	350	128	222	
<b>TOTAL SCHOOL CHILDREN</b> ...	<b>135</b>	<b>992</b>	<b>935</b>	<b>57</b>	<b>674</b>	<b>257</b>	<b>417</b>	
<b>INFANTS (under 5 years)—</b>								
Males ... ... ...	5	44	36	8	81	31	50	
Females ... ... ...	2	36	28	8	75	26	49	
<b>TOTAL INFANTS</b> ... ...	<b>7</b>	<b>80</b>	<b>64</b>	<b>16</b>	<b>156</b>	<b>57</b>	<b>99</b>	
<b>TOTAL ADULTS, SCHOOL CHILDREN AND INFANTS</b> ...	<b>544</b>	<b>2,584</b>	<b>2,393</b>	<b>191</b>	<b>1,643</b>	<b>517</b>	<b>1,126</b>	

Particulars of the source of the 2,584 “Suspects” were as follows :—

Private Doctor	School Medical Department	Pensions Board	Voluntary Hospitals	Maternity and Child Welfare Centre	Own request	Total
2,029	432	2	115	4	2	2,584

The large figure of 2,584 sent to the Dispensary for diagnosis shows that the medical profession in Sheffield continue to make full use of the Dispensary. In 85·3 per cent. of the notifications for the year the patients were sent to the Dispensary prior to notification. It is in this way that we find our early and curable cases. It is gratifying to find that the medical profession in Sheffield recognise the importance of early diagnosis, and to know that the co-operation between all members of the medical profession and the Dispensary is so good.

The ultimate diagnosis of these suspicious cases often entails observation for long periods, and, in many cases, residence in the observation beds in the Sanatoria.

Cases which are diagnosed in the General Hospitals are always treated as urgent cases, and are admitted to Sanatorium without delay.

The number of attendances at the Dispensary made by “Suspects” during 1927 was 16,146.

During the year 105 patients were examined at home in consultation with private medical practitioners.

“CONTACTS.”—1,643 “Contacts” from the homes of notified cases were examined, and of these it was found desirable to retain 31·22 per cent. for further observation and treatment.

#### PATIENTS OF SCHOOL AGE.

As in former years, the work of the Tuberculosis Dispensary amongst tuberculous children has been carried on in close co-operation with the School Medical Department. The extra sanatorium beds provided have added much to the value of the preventive work amongst school children.

The School Medical Officers refer all suspicious cases to the Dispensary for diagnosis, and the responsibility for diagnosis and notification rests with the Tuberculosis Officer.

The names of all children of school age who are known to have been exposed to infection in their homes are supplied to the School Medical Officer, so that he may observe them closely during their school life. If any indication of Tuberculosis is observed amongst these children they are immediately referred to the Tuberculosis Dispensary. In this way the School Medical Officer is kept in touch with a large proportion of the children who are known to have been exposed to infection.

The greater part of the work at the Dispensary on Wednesday and on Saturday morning is devoted to children of school age, and one of the Assistant School Medical Officers attends each Session on Wednesday.

During the year 1927, 18,060 attendances (exclusive of new cases) were made by school children, 11,803 by notified cases, and 6,257 by observation cases.

Twenty-eight places at the Whiteley Wood Open-Air School, and twenty-six places at the Springvale House Open-Air School, were reserved for children selected by the Tuberculosis Officer.

Tubercle Bacilli were found in the sputum of six children, whose names were, therefore, taken off the school registers.

It will be observed from these figures that a large amount of work is being done among the school children of Sheffield, and I feel confident that this is the most encouraging part of our work, and is likely to be favourably reflected in our future tuberculosis results.

**TOTAL ATTENDANCES.**—The number of attendances at the Dispensary during 1927 was 62,528, which includes 3,262 attendances for ultra violet light treatment.

#### EXAMINATION OF SPUTA.

During the year 3,846 specimens of sputa were examined, 794 at Crimicar Lane Sanatorium, and 3,052 at the Dispensary. Of these, 3,846 specimens 814 were found to contain typical tubercle bacilli.

#### X-RAY APPARATUS.

2,044 Skiagrams were taken during the year, as compared with 1,709 during 1926. A first-class skiagram is not only valuable as a permanent record of the condition of a chest, but is so useful in diagnosis that it may now be considered indispensable. It is now the routine practice to take an X-ray film of the chest of all adult cases who have either a negative sputum or no sputum.

#### INSTITUTIONAL TREATMENT.

The provision of extra accommodation for women, namely 47 beds at Nether Edge Hospital has completed the Health Committee's Scheme for our Institutional needs.

It is pleasing to record that the number of beds allocated for the treatment of All Forms of Tuberculosis in the City of Sheffield appears to have reached a maximum figure, and, fortunately, long waiting lists for institutional treatment are a thing of the past.

The total number of beds available for the treatment of Respiratory Tuberculosis is as follows :—

Crimicar Lane Sanatorium	...	...	...	108 males.
Moor End Sanatorium	...	...	...	43 females.
Winter Street Hospital	...	...	...	48 males.
" "	...	...	...	58 females.
Nether Edge Sanatorium	...	...	...	62 men.
" "	...	...	...	47 women.
" "	...	...	...	79 boys.
" "	...	...	...	60 girls.

The following Table shows the number of admissions, discharges, and deaths at the various Institutions :—

TABLE XXXV.

		Admissions	Discharges	Deaths	Number remaining at Dec. 31st, 1927
Commonside Sanatorium—					
Adult Females...	...	204	195	6	39
Girls ...	...	12	16	—	—
Crimicar Lane Sanatorium—					
Adult Males ...	...	499	452	38	89
Boys of School Age ...	...	59	72	1	11
Winter Street Hospital—					
Adult Males ...	...	155	131	27	29
,, Females...	...	235	212	15	39
Boys ...	...	100	97	2	15
Girls ...	...	81	89	5	14
Nether Edge Sanatorium—					
Adult Males ...	...	286	252	31	63
,, Females...	...	234	191	2	41
Boys ...	...	486	472	...	73
Girls ...	...	416	412	...	57
		2,767	2,591	127	470

The following Table shows the classification of cases received in the various Sanatoria during the year :—

This shows that a large proportion of the cases were admitted in the early stage of the disease, viz., 44·7 per cent. of the men, 53·8 per cent. of the women, and 67·5 per cent. of the children.

The early diagnosis appears to me to be the most important factor in explaining the low Death-rate for the City of Sheffield.

#### REPORTS, ETC., TO MINISTRY OF PENSIONS, AND TO THE REGIONAL MEDICAL OFFICER OF THE MINISTRY OF HEALTH.

During the year, 642 certificates and reports with regard to ex-service men were furnished to the Ministry of Pensions; and 118 reports on the condition of patients were made at the request of the Regional Medical Officer of the Ministry of Health.

#### AFTER CARE.

The organisation with regard to after-care is carried on through the Dispensary. Unsatisfactory cases are reported to the Hospitals Sub-Committee, who consider the cases and instruct the Tuberculosis Medical Officer to deal with them. Shelters are lent to infectious cases, but it is found in Sheffield that the home surroundings are such that in very few cases is it possible to find adequate accommodation for a shelter. This form of isolation in Sheffield is of very little practical value. Beds and mattresses are lent to infectious cases who are unable to provide for themselves a separate bed, and during the year 98 beds and 101 mattresses were lent.

The Hospitals Sub-Committee work in close co-operation with the Board of Guardians, and certain patients are granted extra relief by the Guardians on the representation of the Tuberculosis Medical Officer, thus overlapping by two Authorities is prevented.

TABLE XXXVI.—INSTITUTIONAL TREATMENT OF TUBERCULOSIS, YEAR ENDED DECEMBER 31ST, 1927.

		WINTER STREET HOSPITAL.			CRIMICAR LANE SANATORIUM.			MOOR END SANATORIUM.			NETHER EDGE SANATORIUM.			TOTALS.					
		Men	Women	Children	Total	Men	Children	Total	Women	Children	Total	Men	Women	Children					
Classification of Cases received during the year	... ..	155	235	181	571	499	59	558	204	12	216	286	230	906	1422	940	669	1,158	2,767
PULMONARY.																			
1. Observation	...	22	39	41	102	85	10	95	30	1	31	65	45	309	419	172	114	361	647
2. Early	...	58	123	130	311	238	46	284	112	9	121	124	125	597	846	420	360	782	1,562
3. Intermediate	...	54	54	7	115	134	2	136	54	1	55	66	51	...	117	254	159	10	423
4. Advanced	...	21	19	3	43	42	1	43	8	1	9	31	9	...	40	94	36	5	135
PERCENTAGES.																			
1. Observation	...	14.2	16.6	22.7	17.9	17.0	16.9	17.0	14.7	8.33	14.4	22.8	19.6	34.1	29.5	18.3	17.0	31.2	23.4
2. Early	...	37.4	52.3	71.8	54.5	47.7	77.9	50.9	54.9	75.0	56.0	43.3	54.3	65.9	59.5	44.7	53.8	67.5	56.5
3. Intermediate	...	34.8	23.0	3.9	20.1	26.9	3.5	24.4	26.5	8.33	25.5	23.1	22.2	...	8.2	27.0	23.8	0.9	15.3
4. Advanced	...	13.6	8.1	1.6	7.5	8.4	1.7	7.7	3.9	8.33	4.1	10.8	3.9	...	2.8	10.0	5.4	0.4	4.8

## WORK OF THE MALE TUBERCULOSIS INSPECTORS.

1. *Tuberculosis of the Lung—New Cases.*

Cases investigated—particulars obtained	...	...	...	...	...	1,731
,, no particulars available	...	...	...	...	...	13
(Principally cases in Institutions who are usually resident in Common Lodging Houses).						
Special cases—not visited	...	...	...	...	...	2
Cases investigated (not notified prior to death)	...	...	...	...	...	30
Cases not visited (transferable deaths from other districts)	...	...	...	...	...	11
						1,787

2. *Other Forms of Tuberculosis—New Cases.*

Cases investigated—particulars obtained	...	...	...	...	...	182
,, not notified prior to death	...	...	...	...	...	27
Cases not visited (transferable deaths from other districts)	...	...	...	...	...	2
<i>Total New Cases—All Forms of Tuberculosis...</i>						
						1,998

Periodic Re-visits to Positive Cases ...     ...

## Additional visits—

(a) For further investigation	...	...	...	...	...	1,624
(b) Re-admission to Hospital	...	...	...	...	...	2
(c) For disinfection after removals	...	...	...	...	...	229
(d) For disinfection after admission to Hospital	...	...	...	...	...	1,499
(e) For disinfection after death	...	...	...	...	...	203
						3,557
Total...	...	...	...	...	...	3,827

Number of rooms sprayed ...     ...

This figure includes 1,161 houses where every room was disinfected after death or removal of the patient.

Number of Reports to District Inspectors *re* defects in houses ...     88Number of Reports to Workshop Inspector *re* cases employed in Workshops ...     68

Cases left City and lost through removal—

(a) Number of Cases left the City	...	...	...	...	...	86
(b) Number of Cases lost sight of—new address not known	...	...	...	...	...	—
<i>Total...</i>						
						86

## VISITATION OF CASES BY THE WOMEN INSPECTORS.

Number of visits to notified Cases	...	...	...	...	...	12,841
Number of visits to notified Cases (ex-service men)	...	...	...	...	...	73
Number of visits on discharge from Sanatorium <i>re</i> home conditions	...	...	...	...	...	2,029
<i>Total visits to cases</i>						
						14,943

REPORT ON NON-PULMONARY FORMS OF TUBERCULOSIS FOR THE YEAR 1927, by C. LEE PATTISON, M.B., B.S., M.R.C.S., L.R.C.P., Surgical Tuberculosis Officer and Medical Superintendent King Edward VII Hospital.

The number of notified cases and the death rate of the various types of non-pulmonary forms of tuberculosis is shown in Table XXXVII.

It will be noticed that the greatest number of deaths are due to Tuberculosis of the nervous system (Meningitis) and that the percentage of deaths from diseases of the bones and joints is small.

TABLE XXXVII.

				Number of Cases Notified	Number of Deaths	Death Rate per 1,000 Population
Nervous (chiefly Meningitis)	...	...	...	56	61	.116
Intestines and Peritoneum	...	...	...	35	11	.021
Vertebral (Spine)	...	...	...	23	6	.011
Bones, other than Vertebrae	...	...	...	4	...	...
Joints	...	...	...	43	1	.002
Skin	...	...	...	2	...	...
Genito-urinary	...	...	...	2	1	.002
Other	...	...	...	42	19	.036
Total	...	...	...	207	99	.189

Arrangements made by the Municipality for the treatment of non-pulmonary tuberculosis may be considered under two headings.

- 1.—INSTITUTIONAL TREATMENT and
- 2.—OUT-PATIENT TREATMENT.

Both are important, and neither can be neglected.

#### (1) INSTITUTIONAL TREATMENT.

##### THE KING EDWARD VII. HOSPITAL—

Children of any age up to 13 or 14 years are treated in this Institution. The number of patients treated annually shows a steady increase, with a corresponding reduction in the number of days necessary in Hospital. (See Table XXXVIII). The shorter period of treatment required is partly due to improved methods of treatment, but much more to the valuable co-operation of medical men in the City, which results in the patients being treated at an early stage of the disease.

TABLE XXXVIII.—Comparative figures of the number of patients admitted and discharged and of the average duration of stay in King Edward VII. Hospital.

Year	Number of Patients		Average duration of stay
	Admitted	Discharged	
1920	75	73	695.5 days.
1921	92	92	603.1 „
1922	98	112	484.5 „
1923	122	114	331.1 „
1924	123	116	369.0 „
1925	131	121	323.8 „
1926	150	148	252.3 „
1927	168	162	247.9 „

Owing to the reduction of the period of treatment required it has been possible to continue to admit patients from areas outside Sheffield. With the sanction of the Ministry of Health the

local authorities concerned pay the full cost of maintenance, including service of debt and educational charges for the beds they occupy. This is on the understanding that only beds shall be used which are not required for Sheffield patients.

#### INSTITUTIONAL TREATMENT FOR ADULTS—

A few surgical cases with lung complication have been treated in Crimicar Lane, Winter Street and Commonside Sanatoria, but where possible such cases have gradually been collected into Nether-Edge Hospital.

An increasing number of patients both male and female have been treated there.

A plaster room has been equipped and a considerable number of splints have been applied there.

A large number of tuberculous abscesses have been operated upon (Aspirated).

#### II.—OUT-PATIENT TREATMENT.

The Out-patient Clinic continues to be held at the Tuberculosis Dispensary. During the year 1927 there were 3,045 attendances, as compared with 2,391 in 1926. There were 223 new tuberculous patients and 60 new patients who were found to be non-tuberculous. Of these 223 tuberculous patients, 48 were adults and 175 children.

#### ULTRA-VIOLET LIGHT TREATMENT—

This form of treatment is being continued and in many cases with marked success. During the year, 3,262 attendances have been made at the light clinic.

## MATERNITY AND CHILD WELFARE.

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WOMEN INSPECTORS' WORK—

**TABLE XXXIX.**

			1925.		1926.		1927.
Visits with regard to Houses-let-in-lodgings	...	...	651	...	774	...	549
Visits with regard to Births	...	...	43,343	...	45,161	...	31,154
Visits to Children 1 to 5 years	...	...	—	...	—	...	14,760
Visits with regard to Schools complaints	...	...	22	...	23	...	32
Visits with regard to Tuberculosis—							
Dispensary Cases	...	...	11,690	...	13,214	...	14,870
Surgical Clinic Cases	...	...	228	...	1,081	...	1,594
Discharged Soldiers	...	...	101	...	97	...	73
Visits to Midwives	...	...	137	...	194	...	253
Visits with regard to Puerperal Fever	...	...	111	...	91	...	288
Visits with regard to Ophthalmia Neonatorum	...	...	580	...	346	...	285
Visits to Expectant Mothers	...	...	105	...	162	...	261
Visits with regard to Measles	...	...	1	...	46	...	13
Visits with regard to Pneumonia	...	...	—	...	8	...	17
Visits with regard to Small Pox contacts	...	...	1,020	...	63	...	2,749
Visits for other reasons	...	...	1,864	...	2,216	...	1,895
Cases reported to N.S.P.C.C.	...	...	6	...	13	...	10
Cases reported to S.Q.V.J.N.A.	...	...	4	...	1	...	1
Nuisances Notices served	...	...	33	...	42	...	33
Prosecutions under Public Health Act, 1875	...	...	1	...	—	...	—
Prosecutions under Byelaws <i>re</i> Houses-let-in-Lodgings			—	...	1	...	—

MIDWIVES ACTS 1902 AND 1918.

At the end of the year 1927 there were 73 midwives in practice on their own account in Sheffield. Of this number 63 were hospital trained midwives and 10 were untrained midwives who were in *bona-fide* practice as such at the time of the passing of the 1902 Act.

There were 253 visits of inspection paid to midwives at their own homes during the year, and 106 midwives were specially interviewed for various reasons connected with their work at the office of the Chief Inspector of Midwives.

Notifications have been received from midwives under certain circumstances, as follows—85 notifications of still birth (51 full time, and 34 premature); 797 notifications that the midwife had been obliged to send for medical help, the reasons for sending for medical help, as far as could be ascertained, being as follows :—

- (1) Abnormal Presentations :—Breech, 22 ; Arm, foot or shoulder, 7 ; Transverse, 4 ; Funis, 6 ; Face, 9 ; Right Occipito Posterior, 65. Total, 113.
- (2) Causes affecting the child :—Convulsions, 5 ; Debility, 29 ; Asphyxia, 16 ; Prematurity, 44 ; Spina Bifida, 7 ; Ophthalmia, 67 ; Jaundice, 8 ; Cleft palate, Hare lip, 5 ; Miscellaneous, 92. Total, 273.
- (3) Causes affecting the mother :—Placenta Praevia, 9 ; Prolapse of Uterine Wall, 1 ; Ante-partum Haemorrhage, 28 ; Eclampsia, 5 ; Post-partum Haemorrhage, 19 ; Rupture of Perineum, 167 ; Contracted pelvis, 29 ; Rigid Os or Perineum, 6 ; Uterine Inertia, 42 ; Miscarriage, 1 ; Adherent Membrane or Placenta, 16 ; Rise of Temperature, 41 ; Miscellaneous, 47. Total, 411.

And 3 notifications that the mother intended to substitute artificial feeding for breast feeding.

## PUERPERAL FEVER.

	1925		1926		1927			
	Puerperal Fever		Puerperal Fever	Puerp. Pyrexia	Puerperal Fever	Puerp. Pyrexia		
	Cases	Fatal	Cases	Fatal	Cases	Cases		
<i>Cases attended by—</i>								
Doctors ... ... ...	28	8	20	7	5	32	12	26
Midwives ... ... ...	13	2	12	4	3	24	3	8
Doctors and Midwives ... ... ...	3	1	1	—	—	3	—	2
Jessop Hospital ... ... ...	23	4	14	2	8	11	5	62
Ecclesall Hospital ... ... ...	1	1	—	—	—	—	—	—
Sheffield Hospital ... ... ...	—	—	2	2	—	3	—	1
Royal Infirmary ... ... ...	—	—	—	—	—	1	1	—
Unattended abortions ... ... ...	13	5	8	3	2	16	9	2
B.B.A. ... ... ...	1	—	—	—	—	2	—	1
Illegal operation ... ... ...	1	1	1	1	—	1	—	—
Procured abortion ... ... ...	—	—	1	1	—	—	—	—
Attendant unknown (outside City) ... ... ...	—	—	—	—	—	2	—	1
	<b>83</b>	<b>22</b>	<b>59</b>	<b>20</b>	<b>18</b>	<b>95</b>	<b>30</b>	<b>103</b>

1926. 1927.

Cases originally notified as Puerperal Fever ... ... ...	... ... ...	51	... 77
Cases originally notified as Puerperal Pyrexia ... ... ...	... ... ...	26	... 121
		<b>77</b>	<b>... 198</b>

Puerperal Pyrexia subsequently notified as Puerperal Fever ... 8 ... 18

(The particulars in the above summary have the necessary alterations).

		1925	1926	1927
Cases nursed at home ... ... ...	... ... ...	5	11	26
Cases nursed entirely in Hospital ... ... ...	... ... ...	25	23	74
,, „ Nursing Home ... ... ...	... ... ...	—	2	—
Cases removed after onset of disease—				
To Jessop Hospital ... ... ...	... ... ...	20	22	21
,, Firvale Hospital ... ... ...	... ... ...	32	17	64
,, Firth Auxiliary Hospital ... ... ...	... ... ...	—	—	11
,, Royal Hospital ... ... ...	... ... ...	—	—	1
,, Lodge Moor Hospital ... ... ...	... ... ...	—	1	2
,, Sharrow Head Nursing Home ... ... ...	... ... ...	—	—	1
,, Rotherham Hospital ... ... ...	... ... ...	1	1	—
		<b>83</b>	<b>77</b>	<b>200*</b>

\* The above figure includes 2 cases which were notified in 1926, and for which subsequent notifications were received in 1927.

## OPHTHALMIA NEONATORUM.

			1925.	1926.	1927.
Cases attended by doctors	...	...	26	26	34
Do. midwives	...	...	162	94	68
Do. doctors and midwives	...	...	2	4	1
Jessop Hospital cases	...	...	16	15	2
Firvale Hospital cases	...	...	4	2	4
Nether Edge Hospital cases	...	...	—	—	1
Not stated	...	...	—	1	—
Unattended	...	...	—	—	2
Cases carried forward to the following year	...	...	13	7	8
			223	149	120
The following cases were brought forward from the previous year and are included in the above summary	...	...	10	13	7
Totals for year	...	...	213	136	113

## DOCTORS' CASES—

		1925.	1926.	1927.
Eyes recovered	...	25	23	30
Eyes damaged	...	—	1	—
Blind in one eye	...	—	—	1
Died from other causes during attack of Ophthalmia Neonatorum	...	1	1	2
Removed	...	— 26	— 26	— 34

## MIDWIVES' CASES—

		1925.	1926.	1927.
Eyes recovered	...	154	93	63
Eyes damaged	...	1	—	1
One eye damaged	...	1	—	—
Died from Ophthalmia Neonatorum	...	2	—	—
Died from other causes during attack of Ophthalmia Neonatorum	...	2	1	3
Removed	...	— 162	— 94	— 68

## CASES ATTENDED BY DOCTORS AND MIDWIVES—

		1925.	1926.	1927.
Eyes recovered	...	2	4	1

## JESSOP HOSPITAL CASES—

		1925.	1926.	1927.
Eyes recovered	...	14	14	2
Out of town cases	...	2	1	—

## FIRVALE HOSPITAL CASES—

		1925.	1926.	1927.
Eyes recovered	...	3	—	3
Eyes damaged	...	1	—	—
Died from other causes during attack of Ophthalmia Neonatorum	...	—	1	—
Cannot trace	...	—	1	—
Removed	...	— 4	— 2	— 4

## NETHER EDGE HOSPITAL CASES—

		1925.	1926.	1927.
Removed	...	—	—	— 1

## NOT STATED—

		1925.	1926.	1927.
Eyes recovered	...	—	1	—

## UNATTENDED—

		1925.	1926.	1927.
Died from other causes during an attack of Ophthalmia Neonatorum	...	—	—	2
Transferred to following year	...	210	142	112
Total	...	223	149	120

MATERNITY CLINIC—					1925.	1926.	1927.
Total attendances during the year ...	...	...	...	860	...	1090	...
Total attendances from commencement ...	...	...	...	2834	...	3924	...
Number of sessions during the year ...	...	...	...	83	...	101	...
Average attendances at each session ...	...	...	...	10	...	11	...
Total new cases during the year ...	...	...	...	401	...	532	...

## Cases sent by—

## Centre Staff :

Doctors	...	...	...	...	...	8	...	6	...	14
Inspectors	...	...	...	...	...	66	...	84	...	104
Certified Midwives	...	...	...	...	...	93	...	106	...	187
Outside Doctors	...	...	...	...	...	4	...	5	...	20
Outside Midwife	...	...	...	...	...	—	...	1	...	—
Friends	...	...	...	...	...	168	...	186	...	240
Jessop Hospital	...	...	...	...	...	—	...	1	...	1
Nether Edge Hospital	...	...	...	...	...	—	...	—	...	1
Tuberculosis Dispensary	...	...	...	...	...	—	...	3	...	—
M.O.H.	...	...	...	...	...	—	...	—	...	1
Councillor	...	...	...	...	...	—	...	—	...	1
Lady Guardian	...	...	...	...	...	—	...	1	...	—
Registrar	...	...	...	...	...	—	...	1	...	—
Salvation Army	...	...	...	...	...	1	...	2	...	3
British Legion	...	...	...	...	...	—	...	1	...	—
Council of Social Service	...	...	...	...	...	—	...	—	...	1
Attended Clinic in London	...	...	...	...	...	1	...	—	...	—
Attended previously ...	...	...	...	...	...	44	...	69	...	44
Came unadvised	...	...	...	...	...	16	...	66	...	113
						—	401	...	532	...
						—	—	—	—	730

New cases in 1920, 127 ; do. 1921, 216 ; do. 1922, 231 ; do. 1923, 256 ; do. 1924, 314.

					1925.	1926.	1927.
Patients who paid 1 visit	...	...	...	...	226 — 226	330 — 330	305 — 305
Do.      do.      2    do.	...	...	...	...	100 — 200	108 — 216	151 — 302
Do.      do.      3    do.	...	...	...	...	30 — 90	33 — 99	99 — 297
Do.      do.      4    do.	...	...	...	...	14 — 56	22 — 88	63 — 252
Do.      do.      5    do.	...	...	...	...	6 — 30	12 — 60	36 — 180
Do.      do.      6    do.	...	...	...	...	5 — 30	12 — 72	26 — 156
Do.      do.      7    do.	...	...	...	...	5 — 35	5 — 35	10 — 70
Do.      do.      8    do.	...	...	...	...	2 — 16	1 — 8	11 — 88
Do.      do.      9    do.	...	...	...	...	4 — 36	1 — 9	9 — 81
Do.      do.      10   do.	...	...	...	...	3 — 30	4 — 40	6 — 60
Do.      do.      11   do.	...	...	...	...	2 — 22	3 — 33	1 — 11
Do.      do.      12   do.	...	...	...	...	—	1 — 12	4 — 48
Do.      do.      13   do.	...	...	...	...	1 — 13	—	6 — 78
Do.      do.      14   do.	...	...	...	...	1 — 14	—	1 — 14
Do.      do.      17   do.	...	...	...	...	1 — 17	—	2 — 34
Do.      do.      18   do.	...	...	...	...	1 — 18	—	—
					—	401 — 833	—
					—	532 — 1002	—
					—	730 — 1976	—
Attendances by previous year's patients ...	...	...	...	27	...	88	...
Total attendances ...	...	...	...	860	...	1090	...

**BABY CONSULTATIONS.**

<i>Centre.</i>		1925.	1926.	1927.
Total attendances during the year ...	... ... ...	46,580	48,307	48,249
Average weekly attendances during the year ...	... ...	896	929	928
Total attendances from commencement to the end of the year ...	... ... ... ...	502,420	550,727	598,976
Number of sessions during the year (excluding Saturday mornings) ...	... ... ... ...	1,468	1,464	1,461
Average attendance per session (per doctor) excluding Saturday mornings ...	... ... ... ...	31	33	33
Number of sessions taken by doctors ...	... ... ...	932	954	953
Number of sessions taken by inspectors ...	... ... ...	536	510	508
Total new babies during the year ...	... ... ...	3,841	3,825	3,630
Average of new babies weekly ...	... ... ...	74	74	70
New babies over 1 year ...	... ... ...	465	425	418
New babies under 1 year ...	... ... ...	3,376	3,400	3,212

**ATTENDANCES PER MONTH—**

	1925		1926		1927	
	New Cases	Total Attendances	New Cases	Total Attendances	New Cases	Total Attendances
January ...	308	3,750	325	3,767	269	3,633
February ...	301	3,591	342	3,973	304	3,501
March ...	334	4,144	340	4,648	396	4,646
April ...	305	3,544	280	3,698	294	3,693
May ...	294	3,713	265	3,254	336	4,364
June ...	352	3,861	378	4,283	293	3,969
July ...	369	4,297	335	4,257	305	4,022
August ...	331	3,931	327	4,073	335	4,270
September ...	350	4,367	347	4,475	294	4,210
October ...	322	4,186	330	4,108	321	4,317
November ...	295	3,788	332	4,364	305	4,480
December ...	280	3,408	224	3,407	178	3,144
	3,841	46,580	3,825	48,307	3,630	48,249

**Woodhouse Branch.**

		1925.	1926.	1927.
Total attendances during the year ...	... ... ...	1,395	1,421	1,411
Number of sessions during the year ...	... ... ...	52	52	52
Average attendances per session ...	... ... ...	27	27	27
Total new babies during the year ...	... ... ...	99	153	105

**Handsworth Branch—**

		1925.	1926.	1927.
Total attendances during the year ...	... ... ...	553	640	710
Number of sessions during the year ...	... ... ...	26	26	25
Average attendances per session ...	... ... ...	21	25	28
Total new babies during the year ...	... ... ...	62	51	60

**Cases sent to Hospitals and other Institutions.**

Royal Hospital	...	...	...	...	96	61	65
Royal Infirmary	...	...	...	...	70	61	47
Children's Hospital	...	...	...	...	128	174	177
School Clinic	...	...	...	...	12	23	6
Edgar Allen Institute	...	...	...	...	34	28	64
Tuberculosis Dispensary	...	...	...	...	3	3	5
Jessop Hospital	...	...	...	...	—	2	—
					343	352	364

**TABLE XL.****SHEFFIELD QUEEN VICTORIA DISTRICT NURSES.****SUMMARY OF WORK DONE ON BEHALF OF HEALTH COMMITTEE DURING 1927.**

						Cases dealt with	Number of Visits.
Pneumonia	...	...	...	...	...	2,356	6,921
Tuberculosis—							
Pulmonary	...	...	...	...	172		
Surgical	...	...	...	...	108	280	2,340
Diarrhoea—							
Under 5 years	...	...	...	...	...	5	25
Erysipelas	...	...	...	...	...	10	285
Ophthalmia	...	...	...	...	...	6	105
Whooping Cough—							
Under 5 years	...	...	...	...	55		
Over 5 years	...	...	...	...	41		
Adults	...	...	...	...	2	98	195
Measles—							
Under 5 years	...	...	...	...	26		
Over 5 years	...	...	...	...	31		
Adults	...	...	...	...	3	60	229
Typhoid Fever	...	...	...	...	...	2	91
Scarlet Fever	...	...	...	...	...	3	186
Encephalitis Lethargica	...	...	...	...	...	18	389
Totals						2,838	10,766

## MATERNITY CLINIC.

(REPORT BY AGNES S. MACINTYRE, M.B., Ch.B.)

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The Maternity Clinic has continued to grow during 1927. There were 2,094 attendances as compared with 1,090 in 1926.

The average attendance per week was 40 in 1927, as compared with 21 in 1926. The number of new cases in 1927 was 730 and 532 in 1926. The table showing by whom patients were sent is again interesting :—

**Centre Staff :**

Doctors ...	...	...	...	...	...	...	...	14
Inspectors ...	...	...	...	...	...	...	...	104
Certified Midwives	...	...	...	...	...	...	...	187
Outside Doctors ...	...	...	...	...	...	...	...	20
Friends ...	...	...	...	...	...	...	...	248
Attended previously	...	...	...	...	...	...	...	44
Unadvised ...	...	...	...	...	...	...	...	113
								<hr/>
								730
								<hr/>

It again shows that the patients appreciate the clinic enough to attend during the subsequent pregnancy and to recommend it to their friends.

The inspectors have visited 623 cases and have completed the charts :—

491 babies have been born alive.

441 by normal delivery.

49 by instrumental delivery.

1 by Cæsarean section.

37 patients miscarried or had a stillbirth.

64 mothers were not pregnant.

14 mothers could not be traced.

3 mothers lived out of Sheffield.

14 post natal cases attended.

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623

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Details available *re* the 37 cases of miscarriage or stillbirth show that :—

4 were threatened abortions when seen.

1 was offered admission to Nether Edge Maternity Hospital, but own doctor would not agree.

2 mothers had a fall.

2 mothers had albuminuria.

1 refused admission to Nether Edge Maternity Hospital.

1 refused special treatment although offered it free.

2 mothers were tubercular.

3 difficult instrumental deliveries (one at the Jessop Hospital.)

1 mother had valvular disease of the heart.

3 transferred to the Jessop Hospital—no information available.

1 V.D. attended the Jessop Hospital.

1 confinement at the Jessop Hospital—no details have been supplied.

1 mother had anaemia.

1 treated for excessive vomiting—mother stopped coming for treatment.

7 cause unknown—not treated.

8 had special treatment :—

- 1 unsuccessfully treated before—11th stillbirth—1st and 2nd marriage.
- 1 took strong aperients.
- 2 began treatment too late.
- 1 stopped treatment and had stillbirth 2 weeks later.
- 1 baby was very deformed and could not live.
- 2 no reason available.

37

52 cases of previous miscarriage or stillbirth were successfully treated during 1927, *i.e.*, full time healthy babies were born.

It will be noted from the report that while the number of miscarriages and stillbirths has increased from 31 in 1926 to 37 in 1927, the percentage reduction is 1·6 as the number of cases examined and treated has risen from 402 in 1926 to 609 in 1927.

Since the opening of the new premises the work has greatly expanded and daily clinics will be necessary. At present patients examined on Saturday cannot be re-examined before the following Wednesday. In many of the pathological conditions in ante-natal work this is too long an interval.

We also hope to have a post-natal clinic to follow up our work. The uncorrected disabilities consequent on one pregnancy, apart from the physical suffering entailed, are commonly reflected in failures during subsequent pregnancies.

In the past expense has probably been the prime factor in preventing women from obtaining ante-natal attention, but now that we are able to offer those patients, found at the clinics to require it, the necessary hospital treatment as in-patients of Nether Edge Maternity Hospital, many of the complications of pregnancy may be lessened or averted.

Thanks are due to the entire staff at the clinic for their harmonious working as a whole.

#### NETHER EDGE MATERNITY HOSPITAL.\*

Cases admitted for confinement from May, 1927, to 31st December, 1927 :—

Jessop Hospital Cases	...	...	...	...	...	...	...	26
Maternity Clinic (M. & C.W. Centre)	...	...	...	...	...	...	...	30
								— 56

Cases on books at 31st December, 1927, for admission during 1928 ... ... 17

Bookings plus Jessop Hospital cases during 1927 ... ... ... ... 73

Several of the above patients, including one Jessop Hospital case, have had ante-natal treatment at the Nether Edge Maternity Hospital.

\*Opened 3rd March, 1927.

## PREVENTION AND TREATMENT OF VENEREAL DISEASES.

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The Clinics at the Royal Infirmary, Royal Hospital, Jessop Hospital for Women, and Children's Hospital, which were inaugurated in 1917 in accordance with the scheme which was approved by the Local Government Board, continued in full operation during the year 1927.

It will be noted from Table XLI that the new cases treated totalled 1,288 as against 1,300 for the previous year and that the average number of attendances per case totalled 31·5 which is next to the highest figure. It cannot be too clearly understood that the expenditure on the treatment of Venereal Diseases is wasted unless patients remain under treatment until a permanent cure can be guaranteed. This is the main argument in favour of notification and compulsory treatment of these diseases. At the same time one can see no reason why persons who can afford to do so should not pay the whole or some part of the cost of their treatment.

The total cost of treatment during the year was £6,513 which is the highest since 1923 and is accounted for by the larger number of cases treated as In-patients.

Table XLII. gives particulars of pathological examinations made in the Bacteriological Laboratory of the University, of specimens sent for diagnostic purposes by medical practitioners residing in the City.

Table XLIII. gives particulars of all the Clinics in connection with the Sheffield scheme, together with a statement of the average number of patients attending during each quarter of the year.

Table XLIV. gives a summary of the returns from the several hospitals with regard to persons dealt with, distinguishing between Sheffield residents and residents of other districts who have come in for treatment. It should be pointed out that, while the latter receive treatment at the expense of the Department, the Department is recouped in the grant from the Ministry of Health, which in the case of the Venereal Disease account is fixed at 75 per cent., whereas in the case of other grant-aided schemes the percentage is 50.

**TABLE XLI.**—*Venereal Diseases.—Cases Treated and Cost of Treatment since 1918.*

	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927
Total Persons dealt with for the first time ...	1,806	2,798	2,418	1,967	1,399	1,430	1,403	1,196	1,300	1,288
Total Persons dealt with ...	2,245	4,029	4,876	4,464	3,896	3,747	3,034	2,938	3,089	2,835
Total Attendees at the Out-patient Clinics ...	12,846	28,315	28,370	30,366	27,529	38,013	38,057	35,423	44,305	40,544
Average number of Attendances per case ...	7·1	10·1	11·7	15·4	19·7	26·6	27·1	29·6	33·9	31·5
Total "In-patient days" of Treatment ...	4,345	3,197	2,893	2,044	2,157	2,859	1,779	1,905	1,686	2,351
Total Cost of Treatment during financial year ended March following year stated ...	£5,898	£7,919	£9,463	£8,140	£6,720	£6,853	£6,246	£6,293	£6,299	£6,513
Average Cost per Person dealt with for the first time	£3/5/4	£2/16/7	£3/18/3	£4/2/9	£4/16/1	£4/15/10	£4/9/0	£5/5/3	£4/16/11	£5/1/2

**TABLE XLII.**—*Venereal Diseases.—Pathological Examinations made in the Bacteriological Laboratory of the Sheffield University during each year since 1918*

Nature of Test.	Number of Tests.									
	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927
For detection of Spirochetes—										
For Treatment Centres	6	5	1	...	2	3	2	2	3	4
For Practitioners	6	7	3	3	6	2	4	2	3	7
For detection of Gonorrhoea—										
For Treatment Centres ...	1,785	5,119	5,728	5,332	4,079	3,550	3,278	2,829	2,595	2,266
For Practitioners ...	25	71	92	201	340	561	598	584	531	572
For Wassermann reaction—										
For Treatment Centres ...	1,291	2,929	3,492	2,227	1,505	1,528	1,349	1,337	1,178	1,618
For Practitioners ...	104	159	151	1,197	1,160	1,459	2,013	2,173	2,386	2,696
OTHER EXAMINATIONS.										
Gonococcal Complement Fixation Tests—										
For Treatment Centres ...	...	...	1,226	333	62	3	1	...	...	...
For Practitioners ...	...	...	...	4	2	2	...	...	...	...
Cultural Tests—										
For Treatment Centres ...	...	...	...	...	10	57	4	3	12	10
For Practitioners ...	...	...	...	...	...	...	9	4	...	6
TOTALS ...	3,217	8,290	10,693	9,297	7,166	7,165	7,258	6,934	6,708	7,179

TABLE XLIII.—*Venereal Diseases.—Clinics and Attendances during 1927.*

Institution	Medical Officer	Days and Hours of Consultations.	Average Number of Patients attending					
			1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Whole Year	
Royal Infirmary	Dr. Rupert Hallam...	Monday, 1.30 p.m. to 4 p.m. (Syphilis)... Tuesday, 1.30 p.m. to 4 p.m. (Syphilis) Thursday, 1.30 p.m. to 4 p.m. (Syphilis)	... ... ...	19 38 41	17 36 39	21 33 36	22 30 32	20 34 27
Dr. T. B. Mouat	...	Friday, 2 p.m. to 4.30 p.m. (Gonorrhœa)	...	26	21	19	17	21
Dr. Rupert Hallam... Dr. T. B. Mouat	...	Wednesday, 6 p.m. to 8 p.m. for Males only, Syphilis and Gonorrhœa	... ... ... ...	93	92	85	82	88
Royal Hospital	Dr. E. F. Skinner ...	Tuesday, 11 a.m. to 1 p.m. Men and Women (Syphilis) Thursday, 11 a.m. to 1 p.m., Women only Thursday, 7 p.m. to 9 p.m., Men only Saturday, 2 p.m. to 4 p.m., Men only	... do. do. do.	9 12 3 14	9 15 4 15	10 14 6 14	9 11 11 15	9 13 6 15
Dr. J. B. Ferguson Wilson ...	...	Tuesday, 7 p.m. to 9 p.m., Men only (Gonorrhœa) Friday, 7 p.m. to 9 p.m., Men only	... do.	38 34	33 32	34 34	34 37	35 34
Jessop Hospital for Women ...	Dr. J. Ohisholm. ...	Tuesday, 5 p.m. to 7.30 p.m. Thursday, 5 p.m. to 7.30 p.m. Saturday, 11 a.m. to 1.30 p.m.	... ... ...	34 24 10	35 25 9	29 25 10	35 21 13	33 24 11
Children's Hospital ...	Dr. H. Leader ...	Wednesday, 2 p.m. to 4.30 p.m....	... ...	12	15	16	16	15

**TABLE XLIV.**—*Venereal Diseases. Summary of Returns with regard to Persons dealt with, Attendances, etc. during the year 1927, and three previous years.*

AREA OF RESIDENCE OF PATIENTS.											COUNTIES.			
COUNTY BOROUGHS.														
	Sheffield	Roth'ham	Barnsley	Don'ster	Leeds	Other	Y'ks.W.R.	Notts.	Derbys.	Lines.	Other	Total		
Persons dealt with for the first time at or in connection with the Out-patient Clinics														
Royal Infirmary	... 431	24	10	4	—	9	14	4	5	—	—	501		
Royal Hospital	... 383	—	—	—	—	—	33	—	20	—	—	436		
Jessop Hospital	... 205	8	—	—	1	—	36	—	7	—	—	259		
Children's Hospital	... 78	2	3	—	—	—	3	2	4	—	—	92		
Totals, 1927	... 1,097	34	13	4	1	9	86	8	36	—	—	1,288		
Totals, 1926	... 1,069	32	22	5	—	—	23	101	18	30	—	1,300		
Totals, 1925	... 940	40	9	—	—	—	—	95	26	37	—	1,196		
Totals, 1924	... 1,128	49	29	—	—	—	—	70	28	72	2	1,403		
Total attendances at the Out-patient Clinics														
Royal Infirmary	... 23,663	455	338	169	—	—	312	572	351	221	—	26,081		
Royal Hospital	... 8,974	—	—	—	—	3	—	460	—	231	—	9,665		
Jessop Hospital	... 3,369	96	—	—	—	—	—	302	67	167	—	4,004		
Children's Hospital	... 660	3	20	—	—	—	—	—	2	106	—	794		
Totals, 1927	... 36,666	554	358	169	3	312	1,337	420	725	—	—	40,544		
Totals, 1926	... 39,510	881	701	148	—	—	127	1,809	321	808	—	44,305		
Totals, 1925	... 31,505	606	415	—	—	—	—	1,701	317	651	4	35,423		
Totals, 1924	... 33,494	1,013	593	—	—	—	6	1,570	286	759	—	38,057		
Aggregate number of "In-patient days" of all patients														
Royal Infirmary	... 502	—	—	—	—	—	—	—	—	—	—	—		
Royal Hospital	... 223	—	—	—	—	—	—	—	—	—	—	502		
Jessop Hospital	... 1,067	54	—	—	—	—	—	213	45	108	—	362		
Children's Hospital	... —	—	—	—	—	—	—	—	—	—	—	1,487		
Totals, 1927	... 1,792	54	—	—	—	—	—	213	45	247	—	—		
Totals, 1926	... 1,405	32	49	—	—	—	5	181	—	14	—	1,686		
Totals, 1925	... 1,541	39	95	—	—	—	—	44	—	186	—	—		
Totals, 1924	... 1,472	—	22	—	—	—	—	53	1	181	50	1,779		

## SALE OF FOOD AND DRUGS ACTS.

TABLE XLV.—*Results of Analyses during 1927.*

Article	Total Samples Submitted	Formal Samples		Informal Samples	
		Genuine	Adulterated	Genuine	Adulterated
Milk ... ... ...	866	664	21	174	7
Separated Milk ... ...	6	6	...	...	...
Skimmed Milk ... ...	8	7	1	...	...
Condensed Milk ... ...	4	...	...	4	...
Dried Milk ... ... ...	1	...	1	...	...
Cream ... ... ...	13	9	...	...	4
Cream Cheese ... ...	1	...	...	1	...
Cheese ... ... ...	1	...	...	1	...
Butter ... ... ...	66	1	...	65	...
Margarine ... ... ...	18	1	...	17	...
Lard ... ... ...	11	...	...	11	...
Bacon ... ... ...	1	...	...	1	...
Brawn ... ... ...	1	...	...	1	...
Pressed Mixed Meat ...	1	...	...	...	1
Potted Meat ... ...	19	...	...	14	5
Potted Salmon ... ...	4	...	...	3	1
Sausages ... ... ...	35	...	5	25	5
Sausage Meat ... ...	2	...	1	...	1
Coffee ... ... ...	3	...	...	3	...
Rum and Coffee ... ...	1	...	...	...	1
Tea ... ... ...	1	...	...	1	...
Baking Powder ... ...	6	...	1	4	1
Self Raising Flour ... ...	1	...	...	1	...
Candied Peel ... ... ...	2	...	...	2	...
Lemon Curd ... ... ...	3	...	...	3	...
Mince Meat ... ... ...	2	...	...	2	...
Sultanas ... ... ...	3	...	...	3	...
Pearl Barley ... ... ...	2	...	...	3	...
Rice ... ... ...	3	...	...	1	...
Sago ... ... ...	1	...	...	6	...
Ground Almonds ... ...	6	...	...	1	...
Honey ... ... ...	1	...	...	5	...
Jam ... ... ...	5	...	...	1	...
Sponge Buns ... ...	1	...	...	10	1
Vinegar ... ... ...	12	1	...	10	...
Brandy ... ... ...	10	...	...	11	2
Whisky ... ... ...	14	...	1	2	1
Rum ... ... ...	4	...	1	2	...
Mineral Waters ... ...	2	...	2	3	...
Food Preservatives ...	5	...	2	...	...
Ammoniated Tincture of Quinine ... ...	2	...	...	2	...
Camphorated Oil ... ...	4	...	...	4	...
Eucalyptus Oil ... ...	2	...	...	2	...
Friars Balsam ... ...	4	...	...	4	...
Syrup of Figs ... ...	1	...	...	1	...
Sweet Spirit of Nitre ...	15	...	...	13	2
Total ... ...	1,174	689	34	419	32

The Percentage of Adulteration was 5·62 as compared with 5·34 in 1926 and 5·41 in 1925.

*Proceedings taken under the Sale of Food and Drugs Acts.*

Nature of Samples	Number of Cases	Results
Milk	9	Fines amounting to £33 imposed.
Milk	6	Dismissed on payment of Costs.
Milk	1	Dismissed.
Skimmed Milk	1	Fined £10
Dried Milk	1	Fined £2.
Sausages	1	Fined £2.
Sausage Meat	1	Fined £2.
Baking Powder	1	Dismissed.
Whisky	1	Fined £1 and Costs.
Rum	1	Fined £1 and Costs.
Food Preservatives	2	Fined 10/- and £2 10 0 respectively.
Milk	9	Vendors warned and charged Costs.
Cream	2	Vendors warned.
Potted Meat	5	Vendors warned and letters published in the press.
Sausages	4	

**CONTROL OF MILK SUPPLY.**

	Number	Cost
Chemical Analyses of Milk under Sale of Food and Drugs Acts	880	£ 528 0 0
Biological tests of Milk for Tuberculosis ... ... ...	1,304	978 0 0
Microscopical examinations of Milk for Tuberculosis ...	250	
Clinical examinations of Cows ... ... ... ...	11,311	Work done by Veterinary Department Staff.

For further particulars see report under Sale of Food and Drugs Section (page 97), also report of Chief Veterinary Inspector, which follows (page 100), for results of examinations, etc.

## PATHOLOGY AND BACTERIOLOGY.

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**TABLE XLVI.—Bacteriological Examinations at the Sheffield University during the year 1927.**

MONTH	Swabbings for Diphtheria	Serum for Typhoid	Biological Test of Milk for Tubercle Bacilli
January ... ... ...	258	50	107
February ... ... ...	178	26	99
March ... ... ...	214	14	101
April ... ... ...	164	35	123
May ... ... ...	208	27	81
June ... ... ...	155	19	99
July ... ... ...	173	66	127
August ... ... ...	186	43	108
September ... ... ...	215	55	132
October ... ... ...	293	50	99
November ... ... ...	310	36	104
December ... ... ...	237	55	124
<b>Totals</b> ... ...	<b>2,591</b>	<b>476</b>	<b>1,304</b>

*Cost—*

		£ s. d.
2,591 Examinations of	Swabbings for Diphtheria at 3/6	... 453 8 6
476	„ Serum for Typhoid at 5/-	... 119 0 0
1,304	„ Milk for Tuberculosis at 15/-	... 978 0 0

**SPECIAL EXAMINATIONS—**

46 Special Examinations, fees ranging from 10/6 to £15 15 0	... 69 0 6
	<b>TOTAL</b> <b>1619 9 0</b>

*Notes.—(1)* In addition to the examinations carried out at the University, 250 microscopical examinations of Milk for Tubercle Bacilli were made at the Veterinary Department by the Staff ; and 3,846 microscopical examinations of Sputa for Tubercle Bacilli were made by the Staff of the Tuberculosis Dispensary.

(2) Particulars of Examinations in connection with the Venereal Diseases Clinics are given in a table on page 94.

## METEOROLOGY.

TABLE XLVII.—*Meteorology during 1927. Records taken at Weston Park (430' above sea level).*

Week ending.	Mean Barometer Corrected.	Mean Daily Sunshine (Hours).	Grass Minimum. Mean Daily Temperature	Soil 1 Foot. Mean Daily Temperature	Soil 4 Feet. Mean Daily Temperature	Air Maximum. Mean Daily Temperature	Air Minimum. Mean Daily Temperature	Total Rainfall. for the week. (Inches).
Jan.	30.28	1.8	35	38.7	41.4	46	39	—
	29.89	0.7	34	38.7	41.7	46	37	0.28
	29.77	1.7	38	40.7	41.8	48	41	0.13
	31.11	1.5	27	36.4	41.5	39	32	0.26
	29.62	1.5	34	37.1	40.3	47	38	1.19
Feb.	29.85	2.4	30	36.3	40.1	44	35	0.13
	*	*	*	*	39.8	*	*	0.16
	*	*	*	*	39.1	*	*	0.08
	29.44	0.6	33	38.4	39.6	47	37	0.90
Mar.	29.37	1.0	39	40.8	40.3	50	42	1.09
	29.58	3.8	33	40.0	41.2	47	36	0.42
	30.26	3.2	35	40.0	41.2	52	38	0.01
	29.47	2.5	39	44.1	42.2	55	41	1.33
Apr.	29.72	3.0	33	42.3	43.0	49	37	0.83
	29.63	4.5	37	43.2	43.0	50	39	1.09
	30.03	3.4	37	43.8	43.4	53	41	0.22
	30.12	5.4	41	48.6	44.8	62	46	0.34
	*	*	*	*	*	*	*	*
May	30.07	3.4	39	47.4	46.0	60	42	0.54
	30.26	5.1	37	49.1	47.0	57	41	0.11
	29.99	5.7	41	50.4	47.7	59	45	0.44
	30.16	3.3	41	50.9	48.7	56	45	0.07
June	29.91	4.3	43	51.0	49.0	59	46	0.24
	29.98	6.3	41	53.0	49.8	57	45	0.57
	30.00	6.7	42	54.4	50.7	66	47	1.15
	29.88	7.2	45	56.1	52.1	60	48	1.16
July	29.66	2.1	47	54.7	52.5	60	49	1.26
	29.77	4.1	50	57.5	53.0	67	53	2.05
	30.12	4.1	53	59.1	54.5	66	54	0.02
	30.01	2.6	49	58.0	54.9	64	53	0.25
	*	*	*	*	55.3	*	*	0.34
Aug.	30.07	5.3	49	59.9	56.0	70	54	0.11
	29.71	4.2	52	60.8	56.9	69	56	1.63
	*	*	*	*	57.5	*	*	2.26
	*	*	*	*	57.2	*	*	1.30
Sept.	30.20	3.8	54	58.8	56.8	68	55	0.06
	29.92	1.8	50	58.7	57.0	64	52	0.83
	29.82	3.6	46	54.9	56.2	56	48	1.75
	29.44	2.9	46	54.4	56.3	59	48	1.02
Oct.	29.75	2.2	41	52.1	54.3	56	45	0.72
	30.30	2.7	37	50.0	53.0	60	43	0.07
	30.34	1.4	41	49.7	51.8	54	45	0.08
	29.83	2.3	39	48.6	51.2	52	43	1.07
	29.71	2.4	44	49.2	50.2	59	48	0.81
Nov.	29.97	1.4	44	50.8	50.6	59	48	0.92
	29.61	4.0	29	44.2	50.1	42	33	0.01
	30.07	1.3	33	42.4	47.5	47	39	1.21
	29.99	1.4	36	42.7	46.2	46	39	1.05
Dec.	30.31	0.2	33	40.8	45.3	44	36	0.28
	29.86	—	35	41.1	44.5	42	37	0.25
	30.08	0.1	30	39.5	44.0	36	31	0.39
	29.66	0.1	28	36.1	42.5	36	29	1.94
	30.17	1.1	26	35.8	41.0	34	29	0.05

\* Records not available.

**REPORT OF THE CHIEF VETERINARY INSPECTOR  
FOR THE YEAR, 1927.**

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**DISEASES OF ANIMALS ACTS AND ORDERS.**

The following is a list of the Contagious Diseases which are scheduled under the above :— Anthrax, Foot and Mouth Disease, Parasitic Mange of Horses, Rabies, Sheep Scab, Swine Fever, Cattle Plague, Pleuro Pneumonia, Sheep Pox, Epizootic Lymphangitis, Glanders and Farcy, Epizootic Abortion of Cattle

Of the above, no outbreaks of Cattle Plague have been reported since 1877, nor of Pleuro Pneumonia since 1898, nor of Sheep Pox since 1850, nor of Epizootic Lymphangitis since 1906.

*Anthrax.*

Four suspected outbreaks of Anthrax were reported on premises in the City. Each outbreak was investigated but the presence of the disease was not confirmed in any of the cases reported.

Cases of Anthrax in animals occur periodically and the great importance of not attempting to cut or dress an animal taken ill suddenly and found on the point of death or an animal found dead is impressed upon stock owners because of the risk of human infection.

*Rabies.*

No case of Rabies has occurred in Great Britain since 1922, and with a view to preventing the introduction of Rabies from abroad, imported dogs have to be detained and isolated for 6 months on premises approved by the Ministry of Agriculture unless brought in for performing purposes. They are licenced to these places by the Ministry and kept under supervision by the Local Authority. In the latter case they are permitted to go from different places of performance and detained and isolated at these places.

These regulations are carried into effect when imported animals arrive in Sheffield. Suspected cases of Rabies are also reported to the Department, such as dogs suffering from hysteria and convulsions. These cases are investigated and kept under observation.

*Foot and Mouth Disease.*

One case of suspected Foot and Mouth Disease was reported on premises in the City. This was investigated and the existence of the disease was confirmed. This led to the discovery of two contact outbreaks.

The affected and contact animals were slaughtered and those found affected were sent to the Corporation Destructor and burned.

It was found that the source of infection must have originated from some of the surrounding cattle markets from which the affected animals came to Sheffield.

The usual precautions as to disinfection of the premises and everything which had been in contact with the affected animals were carried out.

In connection with this outbreak all movements of animals were controlled by licences issued by this Department or by Inspectors of the Ministry of Agriculture.

During the period when these restrictions were in force, a weekly average of 682 cattle, 1,747 sheep, 921 pigs and 90 calves were licensed to city slaughterhouses for slaughter. This number of live stock therefore represents the weekly average used by the City for its fresh meat supplies.

*Parasitic Mange.*

Three suspected cases of this disease were investigated during the year, but the disease was not confirmed in any of the cases.

One of the first Orders dealing with Parasitic Mange was granted by the Ministry of Agriculture and Fisheries to Sheffield, and the value of the precautions taken under the Order is shown by the fact that the disease in Sheffield is now almost non-existent.

*Swine Fever.*

One hundred and twenty-three cases of illness or death of pigs were reported during the year to the Ministry of Agriculture and Fisheries in compliance with the Swine Fever Order. These cases were investigated by the Veterinary Inspectors of the Ministry and fourteen confirmed as Swine Fever. The carcases of affected animals were destroyed at the Corporation Destructor, and the usual precautions were taken with regard to disinfection of the infected premises, isolation of contact pigs and supervision of their slaughter ready for the butcher or the destruction of carcases of animals subsequently becoming diseased.

Infected premises are generally kept under restrictions for at least three months, but where pigs subsequently die, the premises are only declared free two months after the death of the last pig. Pigs may only be moved from infected premises on a licence granted by an Inspector of the Ministry of Agriculture, and then only if found healthy, and only to a slaughterhouse for immediate slaughter.

*Swine Erysipelas.*

This disease causes death in considerably more pigs than does Swine Fever, but it is not a scheduled disease by the Ministry of Agriculture and therefore no restrictions on movement of animals or disinfection of the premises are placed on the owners of affected animals. Of the 123 cases of deaths amongst pigs in the City a large percentage was due to Erysipelas infection. In most of these cases the owners were advised as to the precautions which they should take in regard to preventive measures against the spread of the disease to other pigs.

*Epizootic Abortion.*

No cases of this disease were found in the City during the year. The Epizootic Abortion Order prohibits the exposure of affected animals in markets, the sale privately of affected animals without previous information being given to the intending purchaser and the service of cows within two months of premature calving.

*Orders and Regulations.*

The most important of the Orders issued by the Ministry of Agriculture and the Ministry of Health which came into operation during the year 1927 are as follows :—

Foot and Mouth Disease (Boiling of Animal Foodstuffs) Order, 1927.

Animals (Landing from Ireland, Channel Islands and Isle of Man) (amendment) Order, 1927.

Importation of Carcasses (Prohibition) (Amendment) Order, 1927

Transit of Animals Order, 1927.

Transit of Animals Amending Order, 1927.

Animals (Miscellaneous Provisions) Order, 1927.

Milk and Dairies Order, 1926, Articles 12, 13 and 24.

The above Orders all give increased powers to the Inspectors of the Ministry of Agriculture and of the Local Authority, but only the following require special attention :—

*Foot and Mouth Disease (Boiling of Animal Foodstuffs) Order.*

Requires that any person having in his possession any part of the carcase of an animal or any waste foodstuffs which have been in contact with any part of the carcase of an animal shall cause all such foodstuffs to be boiled for at least one hour before they are brought into contact with or fed to animals.

Prepared foodstuffs which have in the course of preparation been boiled for at least one hour are exempted.

This Order will, no doubt, be the means of reducing tuberculous infection in pigs produced by the eating of raw meat offals.

*Animals (Landing from Ireland, Channel Islands, Isle of Man) (Amendment) Order.*

The landing in Great Britain of swine brought from Ireland is subject to additional provisions.

*Importation of Carcasses (Prohibition) (Amendment) Order.*

Cured ham and bacon imported from the Continent of Europe to be accompanied by statements describing the process of curing and the name of the factory and of the locality and country in which it is situated.

*Transit of Animals Order.*

Regulates the constructional requirements of vessels and railway trucks for carrying animals and the cleansing and disinfection of same. It also makes regulations in regard to motor vehicles used for the conveyance of animals. It prohibits unfit animals being conveyed and provides for the supply of food and water to animals after being in transit for a certain number of hours.

*Animals (Miscellaneous Provisions) Order.*

Makes certain provisions in regard to administrative powers of the Ministry of Agriculture, Local Authorities and their officers.

## TUBERCULOSIS ORDER, 1925.

During the year 818 inspections of the herds in the city were carried out by the Veterinary Inspectors, 57 cows were found suffering from scheduled forms of tuberculosis and were slaughtered under the order. Of these 23 were found affected with tuberculosis of the udder and 34 with other forms of tuberculosis.

Table showing the number of animals dealt with and the total compensation paid under the Order since it came into force on September 1st, 1925.

			Sept.-Dec. 1925.	Jan.-Dec. 1926.	Jan.-Dec. 1927.
Estimated number of cows in herds examined	...	...	1300	3854	3460
No. of animals slaughtered	...	...	27	82	57
No. affected with T.B. of the udder	...	...	9	32	23
No. affected with other forms of T.B.	...	...	18	50	34
No. with advanced T.B. on post-mortem	...	...	18	48	8
No. not advanced T.B. on post-mortem	...	...	9	34	15
			£ s. d.	£ s. d.	£ s. d.
Total compensation paid	...	...	169 0 0	357 10 0	331 5 0
Amount of Exchequer Grant	...	...	126 15 0	268 2 6	248 8 9
Salvage received	...	...	132 19 4	304 9 1	248 5 2
Excess salvage paid	...	...	4 14 4	40 5 9	6 5 8
Balance towards administration	...	...	86 0 0	174 15 10	153 3 3

## DAIRY INSPECTION.

Under the Milk and Dairies (Consolidation) Act, 1915, the Milk and Dairies (Amendment) Act, 1922, and the Milk and Dairies Order, 1926, the applications of 805 milk retailers for registration and the cases of 2 already on the register were dealt with by the Sanitary Sub-Committee. Eleven applications were refused and 2 persons on the register were removed. There was one appeal against the decisions of the Committee to refuse registration or remove from the register the result of which was not known at the end of the year. One prosecution was taken.

*Milk and Dairies Order, Articles 12, 13 and 24 are now in force.*

Art. 12 relates to the provision of efficient ventilation and lighting of cowsheds.

Art. 13 relates to the water supply of registered dairy premises, a suitable and sufficient water supply to be provided and protected from pollution.

Art. 24 relates to the cooling of milk by cowkeepers and persons receiving milk supplies at collecting stations.

The Sheffield Health Committee, exercising their powers under the above Acts and Orders, requested that milk retailers before being registered to retail milk within the City should provide on their premises a dairy wash-house, apart from their dwelling house, where milk vessels must be washed and stored. A dairy in which to store milk is also required in the case of those who do so and have no hot water supply other than by lighting a fire in the dairy wash-house.

The following list of suggestions was sent to the retailers in order that they might comply with the above requirements and visits were made by the Veterinary and Dairy Inspectors to the premises of retail purveyors.

*Dairy accommodation for persons residing outside the City and retailing milk within the City.*

To entitle an applicant to registration, the Health Committee of the City Council require satisfactory separate accommodation for washing and storing the milk vessels and for cooling and storing the milk. This can best be obtained by providing. :—

A separate *dairy wash-house*, constructed of stone, brick or concrete, with a concrete or slated roof, and with a concrete floor levelled to carry liquid through a weep-hole under the sink discharging over a gully outside.

The internal surface of the walls should be rendered with sand and cement finished to a smooth surface so as to be easily cleansed.

The building should be efficiently lighted and ventilated by means of windows and air-grates and in case of a slated roof the latter should be underdrawn so as to be made dust-proof.

A glazed stoneware sink provided with a stopper and large enough and deep enough to allow milk bottles to be sunk in it should be placed where a good light is available and the waste-pipe should be made to discharge over a gully outside.

Where a piped supply of water is available, cold water should be piped to a tap over the sink and where a hot water system is provided in the house, hot water probably may be piped over the sink in a similar manner. If a hot water system is not in existence a set-pot boiler should be built in the dairy wash-house to provide hot water independently, or the latter may be obtained from a copper boiler heated by gas or some other means.

Sawn stone benching should be provided about 1ft. 9in. wide and placed at a sufficient height from the floor to allow churns and large bottles to stand underneath, small churns and bottles being stored on the bench.

*Dairy.*—Separate accommodation apart from the dairy wash-house should be provided for cooling and storing the milk. The structure of the dairy should be practically the same as the dairy wash-house and all windows and other openings should be covered with 1/32in. mesh wire gauze to make the dairy fly-proof. Where hot water is available without having to light a fire in the dairy wash-house, the milk might be stored in churns from night until morning, the one building being used as a combined dairy and dairy wash-house.

*Drainage.*—An efficient system of drainage to take away the water used in washing the milk vessels and the surface water from the floors should be provided and should be connected to a drainage system or public sewer.

*Situation.*—If possible, the dairy and dairy wash-house should be so situated as to have a northern aspect and for convenience it should be somewhere in the vicinity of the cowshed but not connected therewith and should be some distance away from the manure pit or a privy or pail closet.

A careful supervision of the sanitation of cowsheds in the City and the production and handling of the City's milk supplies was made by the Veterinary and Dairy Inspectors.

*Graded Milk.*—Under the Milk (Special Designations) Order issued by the Ministry of Health, four grades of milk are mentioned—Certified Grade A Tuberculin Tested, Grade A, and Pasteurised. So far only one application has been made for a licence to sell certified milk and two applications have been made with regard to pasteurised milk.

*Elimination of Tuberculous Infection from the City's milk supply.*—In this connection there are 171 cowkeepers resident within the City, the milk from these herds being principally retailed by the owners within the City. The herds were examined five times during the year, and the milk from any diseased animal was prohibited for human consumption.

The total maximum number of cows kept in the City was 2,307, allowing each cow to be in a City cowshed 8 months, it follows that about 769 fresh cows must be added to that number, making about 3,076 in the City cowsheds to be examined during the year.

The number of inspections of city cows made was 9,771 and 23 cows having tubercular udders were discovered—equal to a percentage on 3,076 of 0.74. The numbers of visits made by the Veterinary Inspectors to the city farms was 818.

During the year 1,166 samples of mixed milk brought into the City were taken for bacteriological examination, 93 of which, equal to 7.9 per cent. gave a positive result, whilst 1,073 were negative.

In following up the 93 tuberculous samples, 107 visits were made to 96 farms and the udders of 1,540 cows examined. 55 cows suffering from tuberculosis of the udder and giving tuberculous milk, and 6 cows with other forms of tuberculous infection were found. At 5 farms no cows with tubercular udders were found on the date of our examination, but it was ascertained from the officers of the Local Authorities concerned that a cow at each of the 5 farms had been slaughtered during the period of the sample undergoing the biological test and found suffering from tuberculosis of the udder, thus making a total of 60 cows with tuberculosis of the udder.

*Control samples.*—Altogether 124 control samples were taken representing 96 farms. 22 of these samples, equalling 17.7 per cent. were found tuberculous. These tuberculous controls were investigated and the cows whose milk was included in them were re-examined.

*Special samples.*—A total of 250 special samples was taken, 91 being from city cows, 23 of which were positive, and 159 from country cows, 55 of which were positive.

23 of the city cows and 40 of the country cows were found giving tuberculous milk by bacteriological examination of the milk alone and 15 of the country cows were found by the biological test. 5 cows giving tuberculous milk were also found by the County Authorities, making a total of 83 cows giving tuberculous milk.

*Mixed samples.*—A mixed sample is a sample of milk from the mixed milk of a herd, sent into Sheffield for sale by rail or road conveyance.

*Control samples.*—A control sample is a sample of milk taken from a herd that is being inspected either during routine inspection or following up a tuberculous milk sample.

*Special samples.*—A special sample is a sample of milk taken from a cow with a suspicious udder, found when inspecting herds in the city or country, from which milk is consumed in Sheffield.

During the year 1927, the procedure in dealing with tuberculous infection in the milk supplies coming into the city has been carried out under the Milk and Dairies (Consolidation) Act, 1915. This Act came into force in 1925 and revoked the Milk clauses of the Sheffield Consolidation Act from September, 1926, a year's grace being given after the commencement of the Milk and Dairies Act. The old procedure was for the consuming area to follow up the source of the tuberculous milk sample, from whatever area it was sent. Now the Milk and Dairies Act requires the Local Authority of the area from which the tuberculous milk was sent to make investigations into the source of the infection and notify the time of their intended visit and examination of the herd, so that the consuming area's officers may also be present. Since September, 1926, this alteration in the procedure has been carried out, and the investigations made were in conjunction with the Local Authority of the producing area.

The Tuberculosis Order came into force in 1925, and this Order works in conjunction with the tracing of tuberculous milk under the Act, namely, it empowers the slaughter of animals which are the source of tuberculous infection in the milk supply. It also empowers Local Authorities to slaughter other animals suffering from certain forms of tuberculosis which may not be actual sources of infection of the milk supply at present, but are potential sources of spread of the disease to the udder, and are infectious to other animals in contact with them.

The value of the diseased animal is agreed upon between the farmer and the Local Authority of the area in which the animal is situated, and a percentage of the valuation is paid to the owner according to the extent of the disease in the carcase on post-mortem examination.

During the year, in the examination of country herds following up tuberculous milk samples coming into the city from outside areas 60 cows suffering from tuberculosis of the udder, giving tuberculous milk, were found, and also 5 cows suffering from other forms of tuberculosis. These animals were all slaughtered by the Local Authorities of the respective areas in which the animals were found. In the City routine examination of all the dairy cows was carried out, and 23 cows suffering from tuberculosis of the udder, giving tuberculous milk, and also 50 cows suffering from other scheduled forms of tuberculosis were found and slaughtered.

In previous years a considerable number of country cows affected with tuberculosis of the udder were sold by the owners, their ultimate destination being concealed. These animals are now being dealt with under the Tuberculosis Order, and all such cows found are slaughtered. The Tuberculosis Order, is, therefore, a valuable Public Health measure in removing cows from dairy herds which are giving tuberculous milk.

#### NUMBER OF SAMPLES OF MILK BACTERIOLOGICALLY EXAMINED FOR TUBERCULOUS INFECTION.

		1923.	1924.	1925.	1926.	1927.
Mixed Samples ...	... ... ...	957	966	913	993	1166
Number found Tuberculous	... ... ...	68	73	91	64	93
Percentage ...	... ... ...	7·1	7·5	9·8	6·4	7·9
Control Samples ...	... ... ...	98	112	144	102	124
Number found Tuberculous	... ... ...	23	21	27	19	22
Percentage ...	... ... ...	23·47	17·85	18·75	18·6	17·7
Samples from cows with suspicious udders ...	... ...	134	146	179	302	250
Tuberculous—Biological	... ... ...	10	30	35	15	15
Do. Microscopical	... ... ...	63	45	47	65	63
Do. Total number found	... ... ...	73	75	82	80	78
Percentage ...	... ... ...	54·47	51·37	45·9	26·5	31·2
Estimated number of cows on country farms where mixed milk samples were free from tuberculous infection ...	... ... ... ...	13,335	16,020	14,742	14,025	17,168
Number of country cows clinically examined for tuberculosis of the udder, in following up tuberculous mixed samples ...	... ... ...	1,119	1,282	1,747	1,019	1,540
Tuberculous ...	... ... ...	53	52	59	48	60
Percentage ...	... ... ...	4·73	4·84	4·05	4·8	3·8
Number of city cows clinically examined for tuberculosis of the udder ...	... ... ...	6,427	6,950	9,135	10,652	9,771
Tuberculous ...	... ... ...	19	23	20	32	23
Percentage ...	... ... ...	·5§	·6†	·5‡	·8°	·7*
Disposal of cows with tuberculous udders :—						
Killed ...	... ... ...	58	58	89	80	83
Passed ...	... ... ...	38	34	51	37	39
Percentage ...	... ... ...	65·5	58·6	57·3	46·2	46·9
Condemned ...	... ... ...	20	24	38	43	44
Percentage ...	... ... ...	34·5	41·4	42·7	53·7	53
Sold or otherwise lost sight of ...	... ...	16	17	5	0	0

§ Percentage on 3,700 only

† Do. 3,520 only

‡ Do. 3,800 only

° Do. 3,854 only

\* Do. 3,076 only

## BACTERIOLOGICAL EXAMINATION OF MILK.

With a view to stopping the sale of milk from an animal affected with tubercular mastitis at the earliest possible moment, all the special samples taken were examined microscopically.

If the examination of the milk microscopically results in the demonstration of tubercle bacilli, in most cases the cow is slaughtered forthwith. In practically every case this means that the milk from the rest of the herd is now free from tuberculous infection, whereas if one were to wait for the biological test (*i.e.* 28 days), then the consumers of milk from this dairy would be drinking tubercle infected milk for this period. As a rule, at the end of 28 days the report comes in that the control sample, that is, the sample from the remainder of the herd, is free from tuberculous infection.

The milk yield per day from each cow is estimated at  $2\frac{1}{4}$  gallons, whilst the average number of cows found on the country farms visited during 1927 was 16, and on the city dairy premises 13. Taking into consideration the fact that the milk has been freed from tuberculous infection for 28 days, then the source of infection has been removed from 1,008 gallons in the case of country samples, and 819 gallons in the case of city samples per day for 28 days.

In 1927, 40 country cows and 23 city cows were found to be suffering from tuberculosis of the udder by microscopical examination of the special samples. Thus 66,528 gallons (40,320 + 26,208) of milk were freed from infection, which otherwise would have been tubercle infected and consumed in the city.

## BACTERIOLOGICAL EXAMINATIONS FOR TUBERCULOSIS MADE IN FOLLOWING UP POSITIVE MIXED SAMPLES, AND IN ORDINARY INSPECTION OF CITY COWS, DURING 1927.

Total number of Samples taken from cows showing symptoms suspicious of tuberculosis of the udder	...	...	...	...	...	...	...	...	250
do.      found positive microscopically	...	...	...	...	...	...	...	...	63
do.      „ negative „	...	...	...	...	...	...	...	...	187

Of the 119 sent for the biological examination—

15 returned positive
104 „ negative

Thus definite results have been obtained from 182 samples of milk, and of these 78 have been proved definitely positive. Out of this 78, 63 were found microscopically, or a percentage of 80.

83 negative microscopic samples were not examined by the biological test, as the microscopical examination showed the presence of organisms other than Tubercle Bacilli, or other evidence was present that the disease in the udder from which the sample was taken was not of a Tuberculous nature.

20 samples of sputum from suspected tubercular cows were examined microscopically.

14 contained tubercle bacilli.

6 were negative

4 samples of urine were examined.

1 contained tubercle bacilli.

3 were negative.

These microscopic examinations of milk samples in addition to clinical inspections and the examination of sputum, urine, etc., were carried out in the diagnosis of cows suffering from tuberculosis before slaughter under the Tuberculosis Order, 1925.

Complaints are periodically received from customers in regard to their milk supply, either from the presence of some unusual colour such as blood or some abnormal taste. In such cases samples are taken by the Food and Drugs Inspector and submitted to the City analyst and this laboratory.

In this way it is often possible to detect abnormalities in the milk or the inclusion of the milk from a diseased cow. An inspection of the herd and premises from which the milk was dispatched is then made and the cause of the complaint investigated.

In the sampling of milk for chemical analysis under the new Regulations which came into force in September 1925, viz., the 3rd Schedule of the Milk and Dairies (Consolidation) Act, Sec. 6, if a sample of milk is taken for analyses under the Sale of Food and Drugs Act the owner may appeal to the Local Authority within 60 hours for a sample of milk to be taken from his cows. The Inspector of the Local Authority who takes the sample at the dairy may take any steps he thinks necessary to satisfy him that the sample is a fair one of the milk when the cows are properly and fully milked. These samples are known as "appeal to the Cow" samples. They are of value in arriving at a decision as to the genuineness or otherwise of the original sample taken which was below standard. A notice requesting an appeal to the cow may be made by dairymen each time their milk is sampled for chemical analysis.

In this connection 8 visits were made by the Assistant Veterinary Inspectors in company with the Food and Drugs Inspector. The cows were examined at the completion of each milking and certificates given that the cows were properly milked when the appeal to the cow sample was taken.

#### CORPORATION STUD.

During the year 63 visits were paid to examine and treat horses in Corporation stables.

#### MOTOR CAR SERVICE.

Motor cars were hired from the Central Motor Garage during the year at a cost of £834 for 1,841 hours, the distance travelled being 13,366 miles. This represents a charge of 1/3 per mile or 9/1 per hour. In addition taxicabs were hired at a cost of £19/3/8.

#### MEAT INSPECTION

##### MARKETS, SHOPS, SLAUGHTERHOUSES AND STORES.

In this connection the weekly live-stock markets at Wadsley Bridge and Furnival Road were attended by Inspectors of the Department for the inspection of live animals and the issue of licences under the Diseases of Animals Acts.

The slaughter-houses, meat and fish markets and cold stores were regularly inspected, the total number of visits paid being 7,736 to slaughter-houses, 3,487 to the market places, shambles, shops, stores, etc.

The number of slaughter-houses in use last year was 159, 41 of which belong to the Corporation and are let out to butchers. Of the 118 private slaughter-houses 84 are licensed annually under the Sheffield Corporation (Consolidation) Act 1918. In addition there are three licensed horse slaughter-houses and one place licensed as a knacker's yard.

In addition to the above, a number of carcases of fresh meat slaughtered outside the city boundary are brought into the city.

The Public Health (Meat) Regulations, 1924, were enforced, and judgement of unsound meat was carried out on the lines of the recommendations laid down in Memo 62, Foods for Condemnation, under the Public Health Act, 1875.

The following diseased or suspected animals and carcases were brought into No. 25 Shambles (the slaughter-house set apart by the Corporation for the slaughter of diseased or suspected animals and as a detention room for such meat) 801½ carcases of beef of which 203½ were condemned; 92 carcases of mutton, 62 of which were condemned; 22 carcases of pork, 15 being condemned; 97 carcases of veal, 62 of which were condemned.

The total amount of diseased meat, offals, fish, and unsound food condemned during the year was as follows :—

*Meat.*—115 tons 19 cwts. 1 qr.

*Fish.*—31 „ 2 „ 1 „

*Rabbits.*—1,308 couples.

*Preserved food.*—3,258 tins of canned goods.

*Game, etc.*—1 pheasant, 3½ brace partridges, 19 brace wood pigeons, 20 ptarmigans, 64 fowls.

*Cheese.*—13 lbs.

*Fruit and Vegetables.*—47 boxes tomatoes, 6 boxes and 5 bags pears, 14 boxes apples, 80 bags potatoes, 50 boxes plums, 10 crates radishes, 15 chips blackberries, 18 bags black currants, 1 truck cauliflowers.

In carrying out the inspection of the above meat and other foods a large number of bacteriological examinations of specimens were carried out in the laboratory.

Estimated number of animals slaughtered annually in the Shambles and private slaughter-houses for the city's fresh meat supply :

No. and Class of Animals	Average Weight	Total Weight
35,464 cattle	47 st.	10,412 tons 16 cwts.
90,844 sheep	66 lbs.	2,554 „ 19 „
47,892 pigs	15 st.	4,489 „ 7 „
4,680 calves	56 lbs.	117 „

The weight of imported meat, comprising frozen and chilled meat brought into the city shops was :

*Beef.*—12,354 tons.

*Mutton, Lamb, Pork and Veal.*—21,304 tons.

#### INSPECTION OF HORSES AND CARCASSES FOR EXPORTATION ABROAD.

Number of horses submitted for examination	...	...	952
Number of carcasses passed for food	...	...	939
Number of carcasses condemned unfit for food	...	...	13
Number of carcasses exported abroad	...	...	923
Number of visits paid to horse slaughter-houses	...	...	422
Number of horse slaughter-houses	...	...	3

All condemned food stuffs are sent to the Corporation Destructor where they are either dealt with for salvage purposes or destroyed by burning.

#### PUBLIC HEALTH ACT.

All diseased meat, etc., inspected and condemned was submitted to inspection or surrendered by the owners, with one exception only.

#### PROSECUTIONS.

<i>Animals (Transit and General) Order, 1924—</i>		£	s.	d.
Conveyance of Animals in an unsuitable manner	...	...	30	0 0 and costs.
<i>Milk and Dairies Order, 1926</i>				
Selling Milk from unregistered premises	...	...	...	1 0 0
<i>Regulation of Movement of Swine Order</i>				
Movement of pigs without Licence	...	...	...	1 0 0
Failing to isolate pigs moved on licence	...	...	...	3 0 0
do.	...	...	...	2 10 0
<i>Public Health (Meat) Regulation</i>				
Failing to give notice of diseased carcasses			3	0 0
<i>Sale of food order—</i>				
Failure to mark imported meat	...	...	...	3 0 0
“ “ “	...	...	...	3 0 0

My thanks are due to the members of the Staff for the willing assistance they have given me in the work during the year, and also the Chief Constable and Police for the assistance they have rendered.

J. S. LLOYD, F.R.C.V.S., D.V.S.M. (Vic't.),  
*Chief Veterinary Inspector.*

